

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2005 8:00 am
Secretary of State

01-13-2005 90002 048 ***158.75

DOCUMENT # P03000053700

1. Entity Name

J.Z. MASONRY CONSTRUCTION, INC.



Principal Place of Business

3100 SW 95TH CT
MIAMI, FL 33165

Mailing Address

3100 SW 95TH CT
MIAMI, FL 33165

00002001



01032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0569283 ☒ Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZELAYA, JOSE S

~~237 S.W. 13TH STREET 409~~

~~MIAMI, FL 33130~~

3100 S.W. 95th Ct.

Miami, FL 33165

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ZELAYA, JOSE S 3100 NW 95th Ct.
STREET ADDRESS 237 S.W. 13TH STREET 409
CITY-ST-ZIP MIAMI, FL 33130 Miami, FL 33165

TITLE VPSD
NAME GOMEZ, LOURDES R.
STREET ADDRESS 3100 SW 95th Ct.
CITY-ST-ZIP Miami, FL 33165

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/07/05