## 2006 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Mar 29, 2006 08:00 AM DOCUMENT # P03000128989 **Secretary of State** 1. Entity Name J. LOWE'S MASONRY, INC. Principal Place of Business Mailing Address 2732 HAULOVER BLVD 2732 HAULOVER BLVD DELTONA, FL 32738 DELTONA, FL 32738 02082006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2419140 Not Applicable \$8.75 Additionel 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARK, DIANE P DO NOT WRITE 207 OLD DAYTONA RD DELAND, FL 32724 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 life if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME LOWE, JOHN M 2732 HAULOVER BLVD STREET ADDRESS DELTONA, FL 32738 CITY-ST-ZIP 04/12/06-80056-008 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-SI-ZIP MILE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 in changed, or on an attachment within a address, with all other like empowered. RPRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE

CITY-ST-ZIP