2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065620

City-St-Zip:

APOPKA, FL 32712

FILED Jun 17, 2005 Secretary of State

Entity Nai	me: CAMARILLO	OS MASONRY, INC			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
21 W ALBA APOPKA,	ATROSS ST. FL 32712				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
21 W ALBA APOPKA,	ATROSS ST. FL 32712				
FEI Number:	:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CAMARILLO, JOSE F 21 W ALBATROSS ST APOPKA, FL 32712 US			BLANCO PROFESSIO 385 E MAIN STREET APOPKA, FL 32712		
	named entity su e of Florida.	bmits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: LUIS BLANCO				06/17/2005	
	Electronic	Signature of Registered Ager	nt	Date	
		2)(b), F.S., the corporation did not rust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D CAMARILLO, JOS 21 W ALBATROS APOPKA, FL 327	SE F S ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D CAMARILLO, J GI 21 W ALBATROS APOPKA, FL 327	JADALUPE S ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	T () D DIMINGUEZ, GILE 21 W ALBATROS	BERTO	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LUIS BLANCO **PRE** 06/17/2005