

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000075596

Entity Name: MASONRY TECHNIQUES, INC.

FILED
Sep 30, 2005
Secretary of State

Current Principal Place of Business:

16847 OAK HILL RD
HILLIARD, FL 32046

New Principal Place of Business:

14243 MAY ACRES LANE
JACKSONVILLE, FL 32218

Current Mailing Address:

16847 OAK HILL RD
HILLIARD, FL 32046

New Mailing Address:

14243 MAY ACRES LANE
JACKSONVILLE, FL 32218

FEI Number: 20-2055818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEARSON, JACKIE
16847 OAK HILL RD
HILLIARD, FL 32046 US

Name and Address of New Registered Agent:

PEARSON SR., JACKIE
14243 MAY ACRES LANE
JACKSONVILLE, FL 32218 US

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.

SIGNATURE: JACKIE PEARSON SR.

09/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: PEARSON, JACKIE L
Address: 16847 OAK HILL RD
City-St-Zip: HILLIARD, FL 32046

Title: S () Delete
Name: GEE, NATHAN
Address: 14828 WADE RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: V () Delete
Name: BLANTON, NORMAN R
Address: 13552 WEST 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: PEARSON, JACKIE L
Address: 14243 MAY ACRES LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: S (X) Change () Addition
Name: SHEFFIELD, PATRICIA A
Address: 14243 MAY ACRES LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: V (X) Change () Addition
Name: SHEFFIELD, PATRICIA A
Address: 14243 MAY ACRES LANE
City-St-Zip: JACKSONVILLE, FL 32218

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.

SIGNATURE: PATRICIA SHEFFIELD

V

09/30/2005

Electronic Signature of Signing Officer or Director

Date