2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 04, 2007 8:00 am Secretary of State

1. Entity Name B&B ADVANCED MASONRY, INC.	09-04-2007 90042 020 ***158.75
Principal Place of Business Mailing Address 0	20x 1196
11411 TUCKER RD RIVERVIEW, FL 33569 RIVERVIEW, FL 33568	2 33568
2. Principal Place of Business - No P.O. Box # 3. Mailing Address	
Suite, Apt. #, etc.	1196 06182007 Chg-P CR2E034 (12/06)
City & State Riverviae	7. Sel Number Applied For Not Applied For Not Applied For Not Applicable
(a) 33568	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent Name
KEITH, W CURTIS 1722 STAYSAIL DR	Street Address (P.O. Box Number is Not Acceptable)
VALRICO, FL 33594	
	City FL Zip Code
The above named entity submits this statement for the purpose of changing its reg the obligations of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
CICAIATUDE	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Re	legistered Agent signature required when reinstate g) DATE
	Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the
Signature, typed or printed name of registered agent and tale it applicable. (NOTE: Re FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Trust Fund Contribu	\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
Signature, typed or printed name of registered agent and title if applicable (NOTE: Re FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 10. OFFICERS AND DIRECTORS TITLE Delete	St.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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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 orath; 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:

GATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/07 ×8/

× 813 600 2904

Saytime Phone #