

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90148 035 ***150.00

DOCUMENT # P93000033079

1. Entity Name
A. O. B. MASONRY, INC.

Principal Place of Business C/O ANTHONY O. BERNABEI 15508 - 62 STREET NORTH CLEARWATER FL 34620-2047	Mailing Address C/O ANTHONY O. BERNABEI 15508 - 62 STREET NORTH CLEARWATER FL 33760-2047
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00004010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3183036	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BERNABEI, ANTHONY O
15508 - 62 STREET NORTH
CLEARWATER FL 34620-2047

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PT	<input type="checkbox"/> Delete	TITLE PT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BERNABEI, ANTHONY O		NAME BERNABEI, ANTHONY O	
STREET ADDRESS 15508 - 62ND STREET NORTH		STREET ADDRESS 15508 62ND ST NO	
CITY-ST-ZIP CLEARWATER FL 34620-2047		CITY-ST-ZIP CLEARWATER FL 34620-2047	
TITLE VP	<input type="checkbox"/> Delete	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BERNABEI, ANTHONY J		NAME BERNABEI, ANTHONY J	
STREET ADDRESS 15508 62ND ST NO		STREET ADDRESS 15508 62ND ST NO	
CITY-ST-ZIP CLEARWATER FL		CITY-ST-ZIP CLEARWATER FL	
TITLE S	<input type="checkbox"/> Delete	TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RENAUD, RICHARD J		NAME RENAUD, RICHARD J	
STREET ADDRESS 4001 PARK ST NO 3		STREET ADDRESS 1746 CENTRAL AVE	
CITY-ST-ZIP ST. PETERSBURG FL		CITY-ST-ZIP ST PETERSBURG FL 33712-2047	
TITLE VP	<input type="checkbox"/> Delete	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BERNABEI, KEITH A		NAME BERNABEI, KEITH A	
STREET ADDRESS 15508 62ND ST NO		STREET ADDRESS 15508 62ND ST NO	
CITY-ST-ZIP CLEARWATER FL		CITY-ST-ZIP CLEARWATER FL 34620-2047	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard J. Renaud* **RICHARD J. RENAUD** 1/10/00 127-531-5341
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)