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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000061539 (1)

EDWARD BLACK MASONRY, INC.

FILED Mar 05 1997 8:00am Secretary of State



Principal Place of Business 1791 BLOUNT ROAD SUITE 514 POMPANO BCH. FL 33069 US 2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip Country		DEERFIELD BCH. FL 334 2a. Mailing Address 26 Suite Apt. #, etc. 27 City 8 State 28 Zip	3310 W. HILLSBORO BLVD. DEERFIELD BCH. FL 33442-9403 2a. Mailing Address 26 Suite Apt. #, etc. 27 City & State 28			3. Date Incorporated or Qualified 09/02/1993 06/06/1996 4. FEI Number Applied For Not Applied For Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation has flability for intangible tax under s. 199.032,				
24	25] g_ Name and Address of Curren	29 nt Registered Agent	30			Florida Statutes 10. Name and Address of New Re	Yes ☐ No gistered Agent			
BLACK, EDWARD 1220 SW 10 TERRACE DEERFIELD BCH. FL 33441				81 82 83 84	City	ss (P.O. Box Number is Not Acceptal	FL B5	Zip (
off-ce or re agent ± ar SIGNATURE	othe provisions of Sections 697,050 gistered agent or both, in the State in familiar with, and accept the obliga Signature, speed or printed name of registers a agen OF FICE RS AN	of Florida, Such charige was ations of, Section 607.0505, F and and life if applicable (NO	authorized lorida Stati	i by utes.	the corporation	oration submits this statement for the jon's board of directors. I hereby acced when reinstating) ADDITIONS/CHANGES TO OFFICE	pt the appointment	ent as	registered	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BLACK, EDWARD 1220 SW 10 TERRACE DEERFIELD BCH. FL 33441	DELETE	DELETE 1.1 TI		AODRESS ,	ADDITIONS/ONANGES TO OFFIC	C C		Addilion	
TITLE NAME STREET ADDRESS		☐ DELETE	2.1 TIT 2.2 NA 2.3 STI	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP			□ c	hange	Addition	
TITE NAME STREET ADDRESS CHY-ST-ZP		☐ DELETE	3 1 TIT 3 2 NA	LE Me Reet <i>a</i>	ADORESS		С	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-702		☐ DELETE	4 1 TIT 4 2 N	LE AME REET A	ADDRESS		□ c	hange	Addition	
TIFLE NAME STREET ATIONESS CITY-51-7/P		DELETÉ 51 52 53		5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5.4 CITY - ST - ZPP		, , , , , , , , , , , , , , , , , , , ,		hange	Addition	
TITLE NAME STREET ADDRESS CITY-51-ZIP		☐ DELETE					□ c	hange	Addition	

Information indicated on this annual report or supplemental annual report is true 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 12 or Block 13-if changed or on an attachment with an address.

SIGNATURE: