FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000003542 (5)

CRAIG S. TALBOT MASONRY, INC.

FILED Mar 25 1998 8:00am Secretary of State



5						-			
Principal Place of Business Mailing Address							****** #****	1 1191 1291	
2215 VANDERVORT ROAD 2215 VANDERVORT ROAD									
LUTZ FL 3354	19-5705	LUTZ FL 33549-5705	LUTZ FL 33549-5705			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						01/07/1994			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	App	olied For	
21		26				59-3214939 Not Applic		Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A		
22		27				G. Commonder of Charles Decimes	Fee Red	quired	
City & State	e	City & State				6. Election Campaign Financing	\$5.00		
23 Zin	Country	Zip Country				Trust Fund Contribution	Added to	************************	
Zip	— <u> </u>	 	30	н ці у		8. This corporation owes or has paid the curre		ngible No	
24	g. Name and Address of Current	29 Agent	30	Ι		Personal Property Tax due June 30. 10. Name and Address of New Registered A		NO	
TAI				81	Name	10, stanio asia nasiasia si italia inggista sa	you		
	.Bot, craig s 15 Vandervort Road								
				82	Street Addre	address (P.O. Box Number is Not Acceptable)			
LUTZ FL 33549-5705				83					
				84	City		85 Zip C	ode	
					•	<u>FL</u>	1 1		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered ager	al and the decelerable	Ti . Donistavo	d Ama	at singeture and dra	od when reinstating) DATE			
12.	OFFICERS AND		13.	n võe	is signature reduse	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 12	
TITLE	PD	DELETE	1.170	TLE			Change	Addition	
NAME	TALBOT, CRAIG S		1.2 N				•		
STREET ADDRESS	2215 VANDERVORT ROAD		1.3 STF		ADDRESS				
CITY-ST-ZIP	LUTZ FL 33549-5705			11Y-S	T- ŽIP			1	
TITLE		☐ DELETE	2.1 TI				Change	Addition	
NAME			2.2 N	AME					
STREET ADDRESS	2.3		2.3 \$	TREET	ADDRESS	•			
CITY - ST - ZIP	2 4		2 4 0	ITY-S	T-ZIP				
TITLE	☐ DELETE 3.11		3.1 TI	TLE			Change	Addition	
NAME			3.2 N	AME				1	
STREET ADDRESS			3.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	·		3.4. 0	HY-S	T-ZIP				
TITLE		☐ DELETE	4.1 T)	TLE		į į	Change	Addition	
NAME			4 2 N	IAME					
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CITY-ST-ZIP				ITY-S	F-ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE		☐ DELETE	5 1 TI				Change	Addition	
NAME			52 N						
STREET ADDRESS			53 S	TREET	ADDRESS				
CITY-ST-ZIP				ITY - S	r-zip	·			
TITLE		☐ DELETE	6.1 TI				Change	Addition	
NAME			6.2 N		1				
STREET ADDRESS			6.3 \$1	TREET	ADDRESS				
CITY-ST-ZIP			64 C	ITY-S	r-zip				

14. 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 annual report or supplemental annual 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 execut 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: