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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000032524

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Principal Place of Business	Mailing Address	II
1230 SW 13TH ST BOCA RATON FL 33486 US	P.O. BOX 2547 BOCA RATON FL 33427	1
		3. Date in 04/25
2. Principal Place of Business	2a. Mailing Address	4. FEI Nu
21	26	65-04
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifca
City & State	City & State	6. Election
		1

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90008 050 ***150.00

R.G.R. N	MASONRY, INC.										
Principal Place	e of Business	Mailin	ng Address				1		HILL MICH		
1230 SW 13TH ST P.O. BOX 2547 BOCA RATON FL 33486 BOCA RATON FL 33427											
US					DO NOT WRITE IN THIS SPACE						
							1	Date Incorporated or Qualifed			,
A 5 · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	20.14	-:::- A d d					04/25/1994 FEI Number			plied For
_	lace of Business	<u> </u>	ailing Address				ł	•		_ 	ot Applicable
21 Suite Ant	# ata	26	uite, Apt. #, etc.				1	65-0483593	· -	\$8.75	
								Certifcate of Status Desired		Fee Re	,
22 27 City & State City & State							Election Campaign Financing		\$5.00	May Be	
23		28	,				1	Trust Fund Contribution		Added	
Zip	Country	Zi	p	Cou	ntry		8.	This corporation owes the curren	t year Inta	angible	
24	25	29		30				Personal Property Tax.	·	Yes	□No
	9. Name and Address of Cur	rent Register	ed Agent				10.	Name and Address of New Reg	gistered /	Agent	
					81	Name					
PALAZZO, ANTHONY C 1230 S.W. 13TH STREET				82 Street Addr			O. Box Number is Not Acceptable	e)			
BOC	A RATON FL 33486	1		•	83			· · · · · · · · · · · · · · · · · · ·		1.13.01	
					84	City		1.8 (4) (4) (8) (8) (4) (4) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	er ere Greener Fl	85 Zip	Code
44. Bussiant	to the provisions of Sections 607.0	0502 and 607	1508 Florida Statute	e the at	2006	-named cornor	ration	submits this statement for the ou	mose of	changing its	registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida.∜	Such change was au	uthorized	bv t	the comoration	i's bo	ard of directors. I hereby accept t	he appoir	tment as re	gistered
SIGNATURE									DATE	· ·	
12.	Signature, typed or printed name of registered	AND DIRECT		Registered .	Agent	t signature required v		ADDITIONS/CHANGES TO OFFIC		D DIRECTO	PRS IN 12
TITLE	P	AND DIRECT	☐ DELETE	1.1 TIT	LE					Change	Addition
NAME	PALAZZO, ANTHONY C			1.2 NA							
STREET ADDRESS	1230 SW 13TH STREET					ADDRESS					
CITY-ST-ZIP	BOXA RATON FL										
TITLE	VP			1.4 CIT	ry-st						
NAME			☐ D€LETE	1.4 CIT 2.1 TIT	Y-ST LE	1-ZIP				☐ Change	☐ Addition
STREET ADDRESS			☐ DELETE		LE	I-ZIP			··• <u>·</u>	Change	☐ Addition
	PALAZZO, ROSEANN		☐ D€LETE	2.1 TIT 2.2 NA	LE ME					Change	☐ Addition
	1230 SW 13TH STREET		☐ D€LETE	2.1 TIT 2.2 NA 2.3 STI	LE ME REET	ADDRESS			<u>.</u>	☐ Change	☐ Addition
CITY-ST-ZIP			☐ DELETE	2.1 TIT 2.2 NA	LE ME REET	ADDRESS				☐ Change	☐ Addition
CITY-ST-ZIP	1230 SW 13TH STREET BOCA RATON FL			2.1 TIT 2.2 NA 2.3 STI 2.4 CI	LE ME REET. TY-ST LE	ADDRESS					
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CITY-ST-ZIP TITLE NAME	1230 SW 13TH STREET BOCA RATON FL			2.1 TIT 2.2 NA 2.3 STI 2.4 CF 3.1 TIT 3.2 NA 3.3 STI	LE ME REET. TY-ST LE ME REET. TY-ST	ADDRESS T-ZIP ADDRESS			5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change	
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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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: