

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000001747

Entity Name: OUT ISLAND MASONRY INC

FILED
Jul 22, 2008
Secretary of State

Current Principal Place of Business:

6810 FRONT STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

19570 MAYAN ST
SUGARLOAF KEY, FL 33042

New Mailing Address:

FEI Number: 57-1224796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYERS, MARY BETH CPA
3201 FLAGLER AVENUE
SUITE 506
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: BURNS, LAWRENCE
Address: 19570 MAYAN ST
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: VP () Delete
Name: WENZEL, EDWARD
Address: 280 WEST INDIES DRIVE
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: VP (X) Delete
Name: VALERIO, JAVIER
Address: 19570 MAYAN STREET
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: VALERIO, JAVIER
Address: 19570 MAYAN STREET
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE BURNS

PST

07/22/2008

Electronic Signature of Signing Officer or Director

_____ Date