FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



Ft ORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

1996 DIVISION OF CORPORATIONS						
1. Corporatio	MENT # P9500 LINE MASONRY, INC.	00020250 (3)			
				1 1 8 6 18 8 1 18 1 1 18 18 18 18 18 18 18 18 18 18 18 18 18	AANN AANNA HAHI AAHNO MURI ANNI AANI MAA	
Frincipal Place of Business		Mailing Address		—	11 11	
5401 N.W. 27TH STREET LAUDERHILL FL 33313		5401 N.W. 27TH STREET LAUDERHILL FL 33313				
				 Date Incorporated or Qualified 03/10/1995 	3a. Date of Last Report	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc		65-056666		
[22]		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stati	e	City & State		6. Election Campaign Financing	- \$5.00 May Po	
710	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30]	This corporation has liability for in Florida Statutes	ntangible tax under s. 199,032,	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Ro		
504415			81 Name			
ROYALE MANAGEMENT SERVICES, INC. 2319 N. ANDREWS AVENUE			82 Street Add	et Address (P.O. Box Number is Not Acceptable)		
	ANDREWS AVENUE AUDERDALE FL 33311		83			
. 0111 2	NODERDALL E 000					
			84 City		85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (f	ized by the corporation's boal s. OTE: Registered Agent signature require	ration submits this statement for the purp rd of directors. I hereby accept the appo	intment as registered agent. I am	
	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC		
NAME	BELL, LEE	DELETE	1 1 TITLE		☐ Change ☐ Addition	
STREET ADDRESS	5401 N.W. 27TH STREET		1.2 NAME			
CITY - ST - ZIP	LAUDERHILL FL 33313		1.3 STREET ADDRESS 1.4 CITY+ST-ZIP			
11'16		DELETE	2 1 TITLE		Change Addition	
NAME			2 2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
City-St Zi?		Filotori	2 4 CITY - ST - ZIP			
NAME :		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition	
STEELT ADDRESS			3 2 NAME 3 3 STREET ADDRESS			
CITY - ST - ZIP			34 CITY-SI-ZIP			
Tillef		DELETE	4 1 TITLE		Change Addition	
NAME			4 2 NAME		C overage C Assetton	
SPREET ADDRESS			4.3 STREET ADDRESS			
THE		Filososs	4 4 CITY - ST - ZIP			
NAME		☐ DELETE	5 1 TillE		Change Addition	
SEREFT ADDRESS			5.2 NAME			
CHTY ST-ZIP			5 3 STREET ADDRESS 5 4 CITY - ST - ZIP			
10°LF		DELETE	6 1 TITLE		Change Addition	
NAME			62 NAME		C Company C Montion	
STREET ADDRESS			6 3 STREET ADDRESS			
Cilly -S1 - ZiP	condife that the information consiled	CALL ALLY & C.	6 4 CITY-ST-ZIP			

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify 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 Brock 12 or Block 12 or Block 12 or on an attachment with an address.

SIGNATURE: FE N BULL - Lee n BULL - Pres 1-17-96 484-390