


# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P95000066608		
1. Entity Name "MASONRY" BY GEORGE, INC.		

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

04 DEC 20 AM 9:24

Principal Place of Business 9415 MANGO ST NEW PORT RICHEY, FL 34654 US	Mailing Address 9415 MANGO ST NEW PORT RICHEY, FL 34654 US
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REINSTATEMENT 04

2. Principal Place of Business 3534 CONNOR DR. Suite, Apt. #, etc.	3. Mailing Address 3534 CONNOR DR. Suite, Apt. #, etc.
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06/28/04 90011 004 \$150.00  
12/21/2004 REIN-P CR2E098 (6/04)

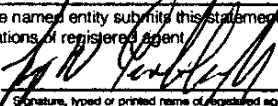
City & State NEW PORT RICHEY FL	City & State N PR FL
Zip 34652	Zip 34652
County PASCO	County PASCO

4. FEI Number 59-3351709	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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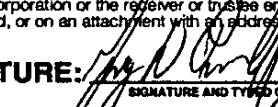
6. Name and Address of Current Registered Agent PENDLEY, JERRY JR 9415 MANGO ST NEW PORT RICHEY, FL 34654	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	JERRY W. PENDLEY JR. PRES 12-14-04

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PENDLEY, JERRY JR 9415 MANGO ST NEW PORT RICHEY, FL 34654 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	JERRY W. PENDLEY JR. 12-14-04 7275152096