PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

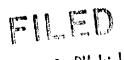


FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P96000029410
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97 DEC -9 PH 10: 18

SUNCOAST MASONRY OF BROWARD, INC.					SEC TALL	SECRE JARY DE STATE TALLAHASSEL, FLORIDA		
Principal Place of Business Malling Address								
3001-NW-102-AVE 2951-NW-102-AVE CORAL-SPRINGS PL-30065			35					
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, if Applicable 3. New Malling Office Address, if Applicable						porated or Qualified		
Sulte, Apt. #, etc. Suite, Apt. #, etc.					Date Incorporated or Qualified To Do Business in Florida 03/29/1996			
10(94 NW 47+# S+ City & State City & State					5. FEI Numbe	~ 0 6 5 44 <i>83</i>	Applied For Not Applicable	
50NK	Country Country	Zip	••	Country	6.	\$8.75	Additional Fee required a Certificate of Status	
	and Street Addresses of Each Officer and	/or Director (Flo	rida nonprof	it corporations must lis				
Title(s)	Name of Officers and/or Directors		T	Street Address Officer and/or I	of Fach	City / Stat	City / State / Zip	
D				861 NW 102 AVE		CORAL SPRINGS FL 33065		
	8. Name and Address of Current	Registered Age	nt		9. Name and	-12/16/97-0 +***165,00	743 7 1078024 ****165.00	
		Trogration of Fig.		Name				
ROBERTS, RICHARD 3861 NW 102 AVE			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
CORAL SPRINGS FL 33065			Suite, Apt.	Suite, Apt. #, Etc.				
				City		State FL	Zip Code	
Signature of Registered	is corporation owes or hangible Personal Proper	egistered ag as paid th	e curre	sign nt year	the obligations of Sect			
12. I certify this rein	that I am an officer or director or the rece statement application, the reason for diss y the corporation have been paid and the	iver or trustee en	npowered to eliminated,	execute this applicati	on as provided for in chatisfies the requirements	apter 607 or 617, F.S. I further c s of section 607.0401 or 617.040	ertify that when filing 01, F.S., that all fees	

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

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12/5/97 954-344-8896



December 4, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

RE: Annual report
Suncoast Masonry of Broward, Inc.

Dear Sandra B. Mortham, Sec of State

I never received my any notice of the annual report filing as my company had closed temporarily and reopened at a new address. Yesterday, the notice of dissolution reached me and after reading the form I noticed that the state requires \$ 750.00 to reinstate. This amount of money paid out for any other reason than masonry supplies and labor would be devasting to me as my business needs all the cash flow it can muster to stay in business.

This seems to me to be a huge penalty to pay for not receiving notification timely.

I am therefore sending my payment of \$ 165 as payment in full for my annual report and hope that you will be a little compashionate for us small business owners who are just trying to make a living. The penalty of \$ 585 is too steep, in fact, that money will pay my electric & phone bill not to mention keep me afloat. Every penny counts especially in So. Fla.

Thank you for your understanding

Richard Roberts Suncoast Masonry of Broward, Inc.

Rubal Robot

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