

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90047 010 ***150.00

DOCUMENT # P99000024915

1. Entity Name

BRITT'S BUILDING BLOCKS, INC.

Principal Place of Business

**3202 ALHAMBRA CIRCLE
 CORAL GABLES FL 33134**

Mailing Address

**3202 ALHAMBRA CIRCLE
 CORAL GABLES FL 33134**

C0044791



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0904070

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BRADLEY, MARIA C
 3202 ALHAMBRA CIR
 CORAL GABLES FL 33134**

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------------------|----------------------|-----------------------|---------------------------------|
| PSTD | BRADLEY, MARIA C | 3202 ALHAMBRA CIRCLE | CORAL GABLES FL 33134 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|--------------------|--------------------------|------------------------|-------------------------------------|-------------------------------------|
| P | Bradley, maria c. | 3202 Alhambra Cir. | Coral Gables, FL 33134 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| V | Bradley, Martin J. | 3202 Alhambra Cir. | Coral Gables, FL 33134 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D | Ritchey, Kenneth | 3881 State Road 84, #107 | Davie, FL 33312 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| S | Perez, Lisa | 15510 SW 144 AVE. | Miami, FL 33177 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIA C. BRADLEY

4/4/01

Date

305-667-4024

Daytime Phone #

CR2E034 (10/00)