2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V09193

FILED Jan 10, 2006 Secretary of State

Entity Name: SOUTH FLORIDA MASONRY, INC.

Current Principal Place of Business:			ness:	New Principal Place of Business:	
	SHINE ROAD LM BEACH, FL	33411	US		
Current N	lailing Address	: :		New Mailing Addr	ress:
	NSHINE ROAD LM BEACH, FL	33411	US		
FEI Number	: 65-0308041	FEI Num	nber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent R	egistered Agent:	Name and Address	s of New Registered Agent:
	DUKER & ASS NIVERSITY DRI		S		
# 204 CORAL SI	PRINGS, FL 33	067 US			
CORAL SI The above			nis statement for the	purpose of changing its registe	ered office or registered agent, or both,
CORAL SI The above	named entity s e of Florida.		nis statement for the	purpose of changing its registe	ered office or registered agent, or both,
CORAL SI The above in the State	named entity s e of Florida RE:	ubmits th	nis statement for the ure of Registered Aહ		ered office or registered agent, or both, Date
CORAL SI The above in the State SIGNATUI	named entity s e of Florida. RE: Electroni	ubmits th			
CORAL SI The above in the State SIGNATUI	named entity s e of Florida. RE: Electroni	ubmits th c Signati	ure of Registered Aç	gent	
CORAL SI The above in the State SIGNATUI Election Car OFFICER: Vame: Address:	named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT	c Signati Trust Fur ORS: Delete	ure of Registered Aç nd Contribution ().	gent	Date
CORAL SI The above in the State SIGNATUI	e named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT P () COLONNA, PAU 125 BELLA VIST ROYAL PALM BI	c Signati Trust Fur TORS: Delete L A WAY EACH, FL	ure of Registered Ag nd Contribution ().	gent ADDITIONS/CHAN Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL COLONNA PRES 01/10/2006