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

PROFIT CORPORATION ANNUAL REPORT



FLOR:DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996		DIVISION OF CORPORATIONS					
OCUN . Corporation	MENT # V3654	4 (7))				
•	MASONRY INC.						
rincipal Place	of Business	Mailing Address			E INDEK MITAND HAND BINDS BOND D	AIR AIBE TIEIL BITH A	ION BION DIBN DIBN 1
2553 DERBY DELTONA F		2553 DERBY DR DELTONA FL 3273	2553 DERBY DR DELTONA FL 32738				
					3. Date Incorporated or Qualified 05/15/1992	3a. Date of L 05/1	ast Report 16/1995
Principal Pla	ace of Business	2a. Mailing Address			4, FEI Number	····	Applied For
Suite, Apt. #	t, etc	Suite, Ant. #, etc			59-3132828		Not Applicat
		27			5. Certificate of Status Desired		8.75 Additionat Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$	5.00 May Be Added to Fees
Zip	Country	Zip	Count	try	8. This corporation has liability for	~~.~~~	
-	25	29	[30]		Florida Statutes	□ No	
	9. Name and Address of Current	negisterea Agent		11 Name	10. Name and Address of New F	legistered Ager	ıt
	KE, KEVIN A.		8		tress (P.O. Box Number is Not Acceptab	ales)	
	ERBY DR		L		iress (F.O. Dox Number is Not Acceptat	ле ј	
DELIVI	NA FL 32738		8	3			
			8	4 City		FL 85	Zip Code
familiar with	n, and accept the obligations of Section	r Such change was author e 607.0505, Florida Statuta	uzea by the cor	e-named corpo rporation's boa	vation submits this statement for the purand of directors. I hereby accept the appr	rpose of changing ointment as regis	gits registered off tered agent I am
familiar with	and accept the obligations of Section Grand accept the obligations of Section OFFICERS AND	Such change was author of 637.0505, Florida Statute of the Change Sate of the S	uzea by the cor	rporation's boa	ard of directors. Thereby accept the appl	ointment as regis	tered agent I am
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SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEVEN A. BONNE 5-14-96 904-532-5859

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