FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

RON ORF CONCRETE CONTRACTOR, INC.	
Principal Place of Business Mailing Address	148188
1830 HYPOLUXO RD. 1830 HYPOLUXO RD.	
SUITE 125-B SUITE 125-B	
LANTANA FL 33462 LANTANA FL 33462	DO NOT WRITE IN THIS SPACE
	3. Date Incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address	04/17/1969 4. FEI Number Applied For
26	59-1268276 Not Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.	SR 75 Additional
27	5. Certificate of Status Desired Fee Required
City & State City & State	6. Election Campaign Financing \$5.00 May Be
28	Trust Fund Contribution Added to Fees
Zip Country Zip Country	8. This corporation owes or has paid the current year Intangible
25 29 30 30 9. Name and Address of Current Registered Agent	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	10. Hallie alla Address or New Registered Agent
UKF, KUN	
	dress (P.O. Box Number is Not Acceptable)
BOYNTON BEAH FL 33437	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co-office or registered agent, or both, in the State of Florida Such change was authorized by the corpor agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	progration submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corpor agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature req	·
2. OFFICERS AND DIRECTORS THE P DELETE 11 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
IAME ORF, RON 12 NAME	Change C. Adordon
TREET ADDRESS 1830 HYPOLUXO # 125- B 13 STREET ADDRESS	
ITY-ST-ZIP LANTANA FL 33462 1.4 CITY-ST-ZIP	
THE VS DELETE 2.1 TITLE	Change Addition
AME ORF, SANDRA 22 NAME	_ , _
TREET ADDRESS 1830 HYPOLUXO # 125- B 2.3 STREET ADDRESS	
ITY-ST-ZIP LANTANA FL 33462 2.4 CITY-ST-ZIP	
TILE T DELETE 3.1 TITLE	Change Addition
AME ORF, MATTHEW 3.2 NAME	
TREET ADDRESS 1830 HYPOLUXO # 125- B 3.3 STREET ADDRESS	
ITY-ST-ZIP LANTANA FL 33462 34. CITY-ST-ZIP	
ITLE DELETE 4.1 TITLE	☐ Change ☐ Addition
AME 4.2 NAME	
TREET ADDRESS 4.3 STREET ADDRESS	
ITY-ST-ZIP 4.4 CITY-ST-ZIP	TALL.
THE DELETE 5.1 WILE	Change Addition
AME 5.2 NAME	
TREET ADDRESS 5.3 STREET ADDRESS 5.4 STREET ADDRESS	
	Change Addition
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	I
TREET ADDRESS 63 STREET ADDRESS	
AME. 62 NAME	I.

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1.31 - 58

FILED

Feb 16 1998 8:00am

Secretary of State