

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY 12 11 08:15

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H48701** (7)
1. Corporation Name
PULEO'S CONCRETE, INC.

Principal Place of Business: **6302 W. LINEBAUGH TAMPA FL 33625**
Mailing Address: **6302 W. LINEBAUGH TAMPA FL 33625**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/22/1985**
3a. Date of Last Report: **04/14/1994**

4. FEI Number: **59-2583799**
Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

7. This corporation has adopted the simplified rules of Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. State, Apt. #, etc.: 27
23. City & State: 28
24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PULEO, ROSS A.
2010 CHICKWOOD CT
TAMPA FL 33618**

81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83.
84. City: **FL** 85. Zip Code:

11. Pursuant to the provisions of Sections 817.04(5) and 817.15(8) Florida Statutes, the above named corporation 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 corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 817.04(5) Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (Print Name and Title)

Signature of New Registered Agent (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS

1. NAME	PD PULEO, ROSS A. 2010 CHICKWOOD CT. TAMPA FL
2. NAME	
3. NAME	
4. NAME	
5. NAME	
6. NAME	
7. NAME	
8. NAME	
9. NAME	
10. NAME	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN:

1. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
7. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
8. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
9. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent and am required to execute this report as required by Chapter 817, Florida Statutes, and that my name appears in block 12 or block 13 of this report, or on an attached list with my address.

SIGNATURE:
SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROSS A. PULEO

4/28/95
813-968-8231