


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

09-08:2004 90121 048 \*\*\*150.00  
FILED P03000037183

**DOCUMENT # P03000037183**

1. Entity Name  
**MARTIN CHARLES CONCRETE, INCORPORATED**



04 NOV -2 PH 4:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**24083553**

Principal Place of Business      Mailing Address  
448 E. PLANT STREET      448 E. PLANT STREET  
WINTER GARDEN, FL 34787      WINTER GARDEN, FL 34787



2. Principal Place of Business      3. Mailing Address  
*SAME*      *SAME*  
Suite, Apt. #, etc.      Suite, Apt. #, etc.  
*SAME*      *SAME*  
City & State      City & State  
*SAME*      *SAME*

07122004      Chg-P      CR2E034 (10/03)

Zip      Country      Zip      Country  
*SAME*      *CHANGE*      *SAME*      *CHANGE*

4. FEI Number      Applied For  
*11-3622800*      Not Applicable

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

6. Name and Address of Current Registered Agent  
**CHARLES, MARTIN  
448 E. PLANT STREET  
WINTER GARDEN, FL 34787**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>MARTIN CHARLES PRESIDENT, TREASURER, SECRETARY 448 E PLANT STREET WINTER GARDEN, FL 34787</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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11/12/04--01058--024      \*\*408.75

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Martin Charles*

09/01/2004      407/877-2459

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

*Attachment*

24083553  
FILED

MARTIN CHARLES CONCRETE, INC. NOV -2 PM 4:59

448 EAST PLANT STREET  
WINTER GARDEN, FL 34787  
FEIN. 11-3682800

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PO3000037183

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

GENTLEMEN:

I HAVE RECEIVED YOUR NOTICE OF INTENT TO DISSOLVE MARTIN CHARLES CONCRETE, INC. DUE TO THE UNPAID ANNUAL REPORT NOW DUE AT A FEE OF \$550.00

WE WISH TO SUBMIT A REASONABLE EXPLANATION FOR THE LACK OF PAYMENT.

THIS IS OUR FIRST YEAR OF OPERATIONS IN THE STATE OF FLORIDA AND WE WERE NOT AWARE OF THE CHANGE IN FILING AND PAYING THE 2004 ANNUAL REPORT THAT IS DUE BY MAY 1<sup>ST</sup> OF EACH YEAR AND PAYABLE THROUGH YOUR WEB-PAGE FOR THE YEAR 2004. OUR OMISSION OF PAYMENT WAS UNINTENTIONAL AND WE WISH TO CONTINUE OPERATING IN FLORIDA. THEREFORE WE REPECTFULLY REQUEST THE ABATEMENT OF THE \$400.00 PENALTY.

PLEASE, ACCEPT OUR APOLOGY FOR THE LATE PAYMENT AND STOP THE PROCESS OF DISOLUTION FOR OUR CORPORATION.

WE CAN ASSURE YOU THAT OUR 2005 ANNUAL CORPORATION REPORT WILL PAID ON TIME

I AM ENCLOSING A CHECK IN THE AMOUNT OF \$150.00 IN PAYMENT OF THE 2004 ANNUAL CORPORATION REPORT.

SINCERELY,

*x Martin Charles*  
PRESIDENT  
SEP 15th 2004