


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 06, 2006 8:00 am**  
**Secretary of State**

06-06-2006 90015 010 \*\*\*150.00

<b>DOCUMENT # P03000155387</b> 1. Entity Name <b>J &amp; J CONCRETE OF PLANT CITY INC.</b>					
Principal Place of Business <b>3006 N CORK RD PLANT CITY, FL 33565</b>			Mailing Address <b>3006 N CORK RD PLANT CITY, FL 33565</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>30-0231015</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>CHARLES, HOGLAND 3006 N CORK RD PLANT CITY, FL 33565</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>CHARLES, HOGLAND 3006 N CORK RD PLANT CITY, FL 33565</b>	<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	VP <b>JOHN, HOGLAND JR 3006 N CORK RD PLANT CITY, FL 33565</b>	<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	SEC <b>CAROLYN, LAWSON 3006 N CORK RD PLANT CITY, FL 33565</b>	<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"/> Delete	<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"/> Delete	<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"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <u>Charles Hogland</u> <span style="float: right;"><b>6-1-06</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

50021141



05242006 Chg-P CR2E034 (11/05)



**ATTACHMENT**  
**50021141**  
**Division of Corporations**

**2006 Annual Report**

**Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.**

This information cannot be changed on the report.	
Document Number	P03000155387
Business Entity Name	J & J CONCRETE OF PLANT CITY INC.
Original File Date	12/19/2003

FEI Number 30-0231015  
Principal Address 3006 N CORK RD  
PLANT CITY, FL 33565  
Mailing Address 3006 N CORK RD  
PLANT CITY, FL 33565  
Registered Agent HOGLAND CHARLES  
3006 N CORK RD  
PLANT CITY, FL 33565 US

**Officer/Director Name And Address**

P  
HOGLAND CHARLES  
3006 N CORK RD  
PLANT CITY, FL 33565

VP  
JR HOGLAND JOHN  
3006 N CORK RD  
PLANT CITY, FL 33565

SEC  
LAWSON CAROLYN  
3006 N CORK RD  
PLANT CITY, FL 33565

If all of the above  
information is correct and  
you do not wish to make any

If you need to make changes  
to the above information,  
please select:

ATTACHMENT

50021141  
#P03000155387

changes, please select:

No Changes

Make Changes

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