


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

01-30-2004 90070 048 ***150.00

DOCUMENT # P99000081276					
1. Entity Name BMH CONCRETE, INC.					
Principal Place of Business 6811 BELVEDERE RD WEST PALM BEACH, FL 33413			Mailing Address P.O. BOX 18453 WEST PALM BEACH, FL 33416		
2. Principal Place of Business			3. Mailing Address		
Suits, Apt. #, etc.			Suits, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0947639	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CALLAWAY, JAY M JR 429 SAN MATEO DRIVE PALM SPRINGS, FL 33461			Name J. MAJOR CALLAWAY JR		
			Street Address (P.O. Box Number is Not Acceptable) PO BOX 18453		
			1302 N LAKESIDE DR. LAKE WORTH FLA 33460		
			City West Palm Beach		Zip Code 33416
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 <i>J. Major Callaway Jr</i>			J. MAJOR CALLAWAY JR		DATE 1-24-04
Signature, typed or printed name of registered agent and date applicable			(NOTE: Registered Agent signature required when reinstating)		DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CALLAWAY, JAY M JR		NAME		
STREET ADDRESS	PO BOX 18453		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33416		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>J. Major Callaway Jr</i>			J. MAJOR CALLAWAY JR		DATE 1-24-04
Signature and typed or printed name of signing officer or director					Daytime Phone #