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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 393139 (1)

1. Corporation Name
TRI-COUNTY CONCRETE PRODUCTS, INC.

Principal Place of Business

8351 NW 93 ST
MEDLEY FL 33166-2025

Mailing Address

8351 NW 93 ST
MEDLEY FL 33166-2025

3. Date Incorporated or Qualified
12/27/1971

3a. Date of Last Report
04/22/1996

2. Principal Place of Business

21 1926 Skies Rd.

Suite, Apt. #, etc.

22 City & State

23 West Palm Beach, FL

24 33411

Country

25

2a. Mailing Address

26 3200 W 84 ST

Suite, Apt. #, etc.

27 City & State

28 Hialeah, FL

29 33018

Country

30 US

4. FEI Number

59-1402441

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

DEBOGORY, ALEX JR.
8351 NW 93 ST.
MEDLEY FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 3200 W 84 ST

84 City

Hialeah

FL

85

33018

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DEBOGORY, ALEX L JR.
STREET ADDRESS
8351 NW 93 ST
CITY - ST - ZIP
MEDLEY FL 33166-2025

TITLE ☐ DELETE

NAME
DEBOGORY, ALEX L
STREET ADDRESS
8351 NW 93 ST
CITY - ST - ZIP
MEDLEY FL 33166-2025

TITLE ☐ DELETE

NAME
BRUNSWICK, DAVID
STREET ADDRESS
8351 NW 93 ST
CITY - ST - ZIP
MEDLEY FL 33166-2025

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
3200 W 84 ST
Hialeah, FL 33018

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3200 W 84 ST
Hialeah, FL 33018

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
3200 W 84 ST
Hialeah, FL 33018

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)