## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

NAME

STREET ADDRESS

CITY-ST-ZIP

**FILED** Apr 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** 395777 (6) MODERN CONCRETE, INC. Principal Place of Business Mailing Address 5512 NW 10TH TERR 5512 NW 10TH TERR. FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/14/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1380699 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Zip 8. This corporation owes or has paid the current year Intangible Yes Yes 29 Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SPENCER, M L 1400 CENTREPARK BLVD. SUITE 900 82 Street Address (P.O. Box Number is Not Acceptable) W. PALM BEACH FL 33401 83 85 Zip Code 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 607.0503, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETË 1.1 TITLE Change Addition SPENCER, M L NAME 1.2 NAME 5512 N W 10TH TERR STREET ADDRESS 1.3 STREET ADDRESS FT LAUD, FL 00000 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE SPENCER, GILBERT NAME 2.2 NAME 5512 N W 10TH TERR STREET ADDRESS 2.3 STREET ADDRESS FT LAUD, FL 00000 CITY-S1-ZIP 2.4 CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST-ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE

62 NAME

14. Thereby 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, own an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP