2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# 450881

Entity Name: FLORIDA CONCRETE UNLIMITED, INC.

Current Principal Place of Business:

14094 S.W. 142ND AVE.
MIAMI, FL 33186

New Principal Place of Business:

14094 SW 142ND AVE.
MIAMI, FL 33186

Current Mailing Address:

14094 S.W. 142ND AVE.
MIAMI, FL 33186

New Mailing Address:

14094 SW 142ND AVE.
MIAMI, FL 33186

FEI Number: 59-1551646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOFF, JAMES T
14094 SW 142 ND AVE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

GOFF, JAMES T
14094 SW 142 ND AVE
MIAMI, FL 33186 US

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.

SIGNATURE: SABRINA GOFF 04/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GOFF, JAMES T
Address: 14094 SW 142ND AVE
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Delete
Name: GOFF, SABRINA L
Address: 14094 SW 142 AVE
City-St-Zip: MIAMI, FL 33186

Title: V (X) Delete
Name: ROSS, ALVIN
Address: 14094 SW 142 AVE
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOFF, JAMES T
Address: 14094 SW 142ND AVE
City-St-Zip: MIAMI, FL 33186

Title: T (X) Change ( ) Addition
Name: GOFF, SABRINA L
Address: 14094 SW 142ND AVE
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SABRINA GOFF T 04/10/2006
Electronic Signature of Signing Officer or Director Date