

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

FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 466221 (9)
1. Corporation Name
CONTINENTAL CONCRETE INC.

Principal Place of Business 6600 N ANDREWS AVE SUITE 200 FORT LAUDERDALE FL 33309 US	Mailing Address P O BOX 93-9007 MARGATE FL 33083-9007 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/13/1974

4. FEI Number 59-1616110	Applied For ☐ Not Applicable
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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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

DAIELLO, THOMAS D ESQ.
4800 N. FEDERAL HWY., SUITE 307B
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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	PD	☐ DELETE
NAME	SWAHN, GOSTA	
STREET ADDRESS	6600 N ANDREWS AVE STE 200	
CITY-ST-ZIP	FT LAUDERDALE FL	

TITLE	GMGR	☒ DELETE
NAME	QUINN, THOMAS	
STREET ADDRESS	2001 W. SAMPLE ROAD, #401	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	VD	☐ DELETE
NAME	RAAB, ROBERT	
STREET ADDRESS	6600 N ANDREWS AVE STE 200	
CITY-ST-ZIP	FT LAUDERDALE FL	

TITLE	VDAS	☐ DELETE
NAME	SUTTON, LARRY	
STREET ADDRESS	6600 N ANDREWS AVE STE 200	
CITY-ST-ZIP	FT LAUDERDALE FL	

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	

2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

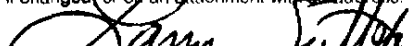
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	SUTTON, LARRY
4.3 STREET ADDRESS	6600 N. Andrews Ave, Suite 200
4.4 CITY-ST-ZIP	Fort Lauderdale, FL 33309

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 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:



THOMAS D. DAELO

1/22/98 (954) 351-1800

CR2E034 (10/97)