FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **597084** **(3)**

1. Corporate Name
CHARLES REDI-MIX, INC.

Principal Place of Business
4550 GLADES CUT-OFF RD
FORT PIERCE, FL 34981

Mailing Address
4550 GLADES CUT-OFF RD
FORT PIERCE, FL 34981

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/12/1978
3a. Date of Last Report: 06/14/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
County — 25 / 30

4. FEI Number: 59-1957836 — 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
BOBKO, NOEL A.
KOHL, BOBKO, MCKEY, MCMANUS, HIGGINS, PA
2400 SO. FEDERAL HWY.
STUART FL 34994

10. Name and Address of New Registered Agent
81 Name: Det H. Joks, P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 10689 No. Kendall Dr.
83: Penthouse 310
84 City: Miami — FL — 85 Zip Code: 33176-1574

11. Pursuant to the provisions of Sections 607.0505 and 607.0506, 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: Det H. Joks — 5-1-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	☐ Change ☐ Addition
NAME	CHARLES, ROGER	
STREET ADDRESS	1900 COCONUT DR.	
CITY, ST, ZIP	FT. PIERCE FL	
TITLE	D	☐ Change ☐ Addition
NAME	CHARLES, ROGER	
STREET ADDRESS	1900 COCONUT DR.	
CITY, ST, ZIP	FT. PIERCE FL	
TITLE	VD	☐ Change ☐ Addition
NAME	CHARLES, EARL JR.	
STREET ADDRESS	6311 OLEANDER AVE.	
CITY, ST, ZIP	FT. PIERCE FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information supplied with this report is truthfully furnished and clear, not partially for the computer, dated in Section 607.0505, Florida Statutes. I further certify that the information contained on the 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 a person elected or appointed to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or is attached with an address.

SIGNATURE: Roger Charles — Roger Charles, President 4-28-95 (407) 464-7244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

0303495 CP