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Mar 19 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 # **830952** **(8)**

1. Corporation Name
PRE-MIX INDUSTRIES, INC.

Principal Place of Business	Mailing Address
832 PROFESSIONAL PLACE CHESAPEAKE VA 23320	832 PROFESSIONAL PLACE CHESAPEAKE VA 23320-3625

3. Date Incorporated or Qualified: **10/01/1973**
3a. Date of Last Report: **04/30/1996**

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: **54-0797240** ☐ 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

BRAGG, CHARLES E.
7124 HARVARD ST.
LAKELAND FL 33803

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 607.0502 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, type or print the name of the registered agent and title, if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JETT,C.K.		1.2 NAME		
STREET ADDRESS	1509 WATERSEDGE DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	VA. BEACH VA		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	JETT, CHARLES K JR		2.2 NAME		
STREET ADDRESS	513 PRINCESS ANNE RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	VA BCH VA		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ALLEN, STEPHANIE J		3.2 NAME		
STREET ADDRESS	2260 WIDGEON LN		3.3 STREET ADDRESS		
CITY-ST-ZIP	VA BCH VA		3.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	EDWARDS, SHARON L		4.2 NAME		
STREET ADDRESS	429 WOODARDS FORD RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	CHESAPEAKE, VA 00000		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	JETT, ANN		5.2 NAME		
STREET ADDRESS	1509 WATERSEDGE DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	VA BEACH VA		5.4 CITY-ST-ZIP		
TITLE	ASD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	JETT, ANDREW D		6.2 NAME		
STREET ADDRESS	2768 GREENDALE AVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	NORFOLK VA		6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: Charles Jett 3/13/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0009619