CR2E003 (10/02)

2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)** The state of the s A0200000199 DOCUMENT # 1. Entity Name FMED CONCRETE WHEELS, LLLP 03 MAY 13 PM 12: 53 Principal Place of Business Mailing Address 1603 SOUTH BUMBY AVENUE 1603 SOUTH BUMBY AVENUE SECHE MARY OF STATE ORLANDO FL 32806-2476 ORLANDO FL 32806-2476 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** City & State City & State 4. FEL Number Applied For 36~4491788 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KOLTUN, JEFFREY M Street Address (P.O. Box Number is Not Acceptable) 557 NORTH WYMORE ROAD, SUITE 100 MAITLAND FL 32751 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$5,000,000.00 155,292 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 679903 DOCUMENT # STREET ADDRESS DANIEL A. MORGAN CONCRETE, INC. NAME 1603 SOUTH BUMBY AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806-2476 CITY-ST-ZIP DOCUMENT # 500018843325 05/13/03--01065--004 **1175 STREET ADDRESS MORGAN, DANIEL A STREET ADDRESS 1603 SOUTH BUMBY AVENUE CITY-ST-ZIP ORLANDO FL 32806-2476 CITY-ST-ZIF DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

STAPLE CHECK HERE

PRINTED NAME OF SIGNING GENERAL PARTNER