

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 07, 2001 8:00 am**
Secretary of State

02-07-2001 90194 032 ***150.00

DOCUMENT # F000000013511. Entity Name
DYNA, INC.Principal Place of Business
**C/O U.S. CONCRETE, INC./LEGAL DEPT.
1300 POST OAK BLVD. SUITE 1220
HOUSTON TX 77056**Mailing Address
**C/O U.S. CONCRETE, INC./LEGAL DEPT.
1300 POST OAK BLVD. SUITE 1220
HOUSTON TX 77056**

010010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **76-0616285**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

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

City

FL

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	HARLAN, MICHAEL W	1300 POST OAK BLVD., SUITE 1220	HOUSTON TX 77056	<input type="checkbox"/>
VTD	SOMMER, CHARLES W	1300 POST OAK BLVD., SUITE 1220	HOUSTON TX 77056	<input type="checkbox"/>
VSD	WAYNE, DONALD C	1300 POST OAK BLVD., SUITE 1220	HOUSTON TX 77056	<input type="checkbox"/>
P	BOWLING, DIANA H	10830 GUILFORD ROAD, #312	ANNAPOLIS JUNCTION MD 20701	<input checked="" type="checkbox"/>
V	MARTINEAU, EUGENE P	1300 POST OAK BLVD., SUITE 1220	HOUSTON TX 77056	<input type="checkbox"/>
AS	THOMAS, STEPHANIE	1300 POST OAK BLVD., SUITE 1220	HOUSTON TX 77056	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D/V	Harlan, Michael W.	1300 Post Oak Blvd, Ste 1220	Houston TX 77056	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	Miller, Robert S.	4600 Forbes Blvd, Suite 105	Lanham MD 20706	<input type="checkbox"/>	<input checked="" type="checkbox"/>
AS	Thomas-Schweigart, Stephanie	1300 Post Oak Blvd, Ste 1220	Houston TX 77056	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephanie Thomas Schweigart*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/01 713499

6210

CR2E034 (10/00)