2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001733

Entity Name: UNITED PRESTRESSED CONCRETE SUPPLY, INC.

FILED Jan 21, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
254 SOUTH MAIN STREET NEW CITY, NY 10956			194 SPEAR ROAD RAMSEY, NJ 07446		
Current Mailing Address:			New Mailing Address:		
254 SOUTH MAIN STREET NEW CITY, NY 10956			194 SPEAR RD SUITE 201 RAMSEY, NJ 07446		
FEI Number	: 22-3846300	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1200 SOU	PORATION SYS ITH PINE ISLAN ION, FL 33324	ND ROAD			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PD () OGLE, WILLIAN 405 CHAMBRAY PEACHTREE C	/ HILL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () SICKLE, DOUG 740 EAGLE PO ST. AUGUSTINE	NT DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () HAYES, ROBER 4390 IMESON F JACKSONVILLE	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	AT () DANGELO, ALD 31 HORSESHO		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ALDO DANGELO AT 01/21/2005

HILLSBOROUGH, NJ 08844

City-St-Zip: