FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90020 012 ***150.00

DOCUMENT # FO3121

1. Corporation	Name (J. 2)	•			, ;	
	CONCRETE PUMPING, IN	NC.				
D HAZIVII	OOMONETE TOM MAG	10.			A SERBITAR TELE RESIDE FISTE NICHO FIRMS NICH BERLE MERIF RERES RECEI	211 A1811 B1811 1981
Principal Place	of Rusinose	Mailing Address			T \$00\$100 till colled likel linke sinne ildi didir denik endi di	DIL GIBLE BIBLE FABI
3052 LEON ROAD PO BOX 19157 JACKSONVILLE FL 32216 JACKSONVILLE FL 32245-9			57			
US US			•		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					10/24/1980	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					59-2034038	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5 Additional
27		us. <u> </u>		5. Certificate of Status Desired Fee	Required	
City & State City & State		City & State			6. Election Campaign Financing \$5.0)0 May Be
23		28			Trust Fund Contribution Add	ed to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Intangible	_
24	25	29	30		Personal Property Tax.	□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent	
			8	Name		
JEWELL, CHAD HOUSTON			8	2 Street Add	ress (P.O. Box Number is Not Acceptable)	
3052 LEON ROAD				-		
JACKSONVILLE FL 32216			8	3		
			<u> </u>	4 01	85 Z	Cip Code
				4 City	FL "	•
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abo	ve-named corp	poration submits this statement for the purpose of changing on's board of directors. I hereby accept the appointment as	its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was au	thorized t	y the corporation	on's board of directors. I hereby accept the appointment as	registered
_	m ramiliar with, and accept the obliga	ilions of, Section 607.0505, Flori	da Statut	73 .		{
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered A	gent signature require	ed when reinstating) DATE	
12.	The state of the s				ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12
TITLE	DP . □ DELETE		1.1 TITLE	E	☐ Chan	ge 🗌 Addition
NAME	JEWELL, DANA B		1.2 NAM	E		
STREET ADDRESS	3052 LEON RD		1.3 STRE	EET ADDRESS		1
	14 OV OOD D W. I. T. OOOOO			-ST-ZIP	•	=
CITY-\$T-ZIP	DVST	DELETE 2.11			☐ Chan	ge Addition
NAME			2.2 NAM			
1 i				EET ADDRESS]
STREET ADDRESS	JACKSONVILLE; FL 00000			-ST-ZIP	A Property of the Control of the Con	}
* CITY-ST-ZIP	JACKSONVILLE, I E 00000	DELETE 3.11			□ Chan	ge Addition
TITLE					-	_
NAME			3.2 NAM			,
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP	Попете		3.4. CITY-ST-ZIP		Chan	ge
TITLE		☐ DELETÉ	4.1 TITU		C. Crian	nge
NAME			4, 2 NAN			
STREET ADDRESS			4.3 STRI	EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		- DAJIN-
TITLE	•		5.1 TTL		☐ Chan	ige
NAME .			5.2 NAM			
STREET ADDRESS			5.3 STRI	EET ADDRESS		ļ
CiTY-ST-ZIP	P : 5.		5.4 CITY	-ST-ZIP		
TITLE		☐ DELETE	6.1 TITL		☐ Char	ige Addition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STR	EET ADDRESS		`

CITY-ST-ZIP 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 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 composition 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 charges, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: X