2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # F03575 U & T CEMENT CONTRACTORS, INC. 05-03-2001 90067 019 ***150.00 Principal Place of Business Mailing Address 7193 BURNSVILLE ST P.O. BOX 885 ENGLEWOOD FL 34224 ENGLEWOOD FL 34295-0885 2. Principal Place of Business 3. Mailing Address P.O. BOX 885 9153 Clewiston TER DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2044518 F14.34295-0885 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent =7.-Name and Address of New Registered Agent HOORE MOORE, HENRY E 7193 BURNSVILLE ST ENGLEWOOD FL 34224 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) TITLE ☐ Delete Moore, HENRY E. 9153 Clewiston TER. ENGLEWOOD, Fla. 34224 NAME NAME MOORE, HENRY E STREET ADDRESS STREET ADDRESS 7193 BURNSVILLE ST CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD FL 34224 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE - Delete TITLE ___Change ____. Addition__ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Apr. 26,2001