FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00



CORPORATION ANNUAL REPORT 1996			San Se	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					
DOCUM 1. Corporation N JOB SIT	IENT # Name E CONCRET	F30677 TE, INC.	(1)						
Principal Place o	f Business		Mailing Address				1001 01011 81	011 DIDH 0184 011	(1) Q(Q); 100)
4610 W. ALVA	ST.		4610 W. ALVA ST. TAMPA FL 33614						
TAMPA FL 336	14		That is to solly			3. Date Incorporated or Qualified 04/15/1981		ite of Last Rep 06/09/1995	
2. Principal Plac	e of Business		2a. Mailing Address			4. FEI Number			pplied For
21			26		·	59-2074033			ot Applicable
Suite, Apt. #,	, etc.		Suite, Apt. #, etc 27	C.		5. Certificate of Status Desired		Fee R	Additional equired
City & State			City & State			6. Election Campaign Financing Trust Fund Contribution		bebbA	May Be to Fees
Zıp	25	Country	Zip 29	30 Co.	intry		s 🖪 No		199.032,
		Address of Current R	egistered Agent		B1 Name	10. Name and Address of New	Registere	d Agent	
PAULINE, 4610 W / TAMPA F	ALVA ST L 33614				82 Street Ad 83 84 City	ldress (P.O. Box Number is Not Accepta	F		Code
familiar with	o the provisions of ed agent, or both h, and accept the War E sgnature types or prin	aufme	bur 10005, Florida Sta	a(U(C).		poration submits this statement for the poard of directors. I hereby accept the applications are resisted. ADDITIONS/CHANGES TO OF	DATE:	1/1/9	4
12.	PD	O. HOLHO MAS E	DELETE		TITLE			Change	Addition
NAME STREET ADDRESS	PAULINE, W 2119 VENU			1.3 \$	NAME STREET ADDRESS				Addition
CHY-ST-ZIP TITLE	TAMPA FL VP		☐ DELET	2.1	TITLE			Change	Addition
NAME STREET ADDRESS	PAULINE, V 6916 W. LA			233	NAME STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		DELE1		THE			Change	Addition
TATLE	VP DALILINE T	IN C	ال باددوا		NAME .				
NAME CTOSE LADORESS	PAULINE, T 8412 GARD				STREET ADDRESS				ļ
STREET ADDRESS CITY-ST-ZIP	TAMPA FL	HER HU.			CITY - ST - ZIP				
TITLE	V.P		DELE 1	E 41	TITLE			Change	☐ Addition
NAME	timoles	Ruck Baring Frail Fl. 33615	La.		NAME STREET ADDRESS				
STREET ADDRESS CITY - ST - ZIP	1771	F/ 33615			CITY - S1 - ZIP				
TITLE	1-70	<u> </u>	DELE1	E 5 1	TITLE			Change	Addition
NAME				5.2	NAME				
STREET ADDRESS				53	STREET ADDRESS				
CITY - ST - ZIP					CITY - ST - ZIP			Change	Add-tion
TI*LE			☐ DELE		1 TIILE			☐ CHRIGE	[740 pm]
NAME				6.2	NAME				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, Ffurther 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 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 12 or Block 13 if changed, or on an apachment with an address.

SIGNATIRE-

SIGNATURE: