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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400001952 (0)

CEMEX USA MANAGEMENT, INC.

Driveniero i Dieres						
·	e of Business	Mailing Address				
ONE RIVERWAY SUITE 2200		5111 WOODWAY 600 TRAVIS				
HOUSTON TX	77058	HOUSTON TX 77056-172	2			
US TA THOSE		US		3. Date Incorporated or Qualified	3a. Date of Last F	eport
		Ta Marrie Assessed		04/15/1994 4. FEI Number	05/01/1996	
	ace of Business	2a. Mailing Address				optied For
Suite, Apl	#	26 One River	way	76-0189755		t Applicable
22		Suite 220	00	5. Certificate of Status Desired	Fee R	Additional equired
City & Strife 23		28	Texas	Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	77056	Country	8. This corporation has liability for		. 199.032,
24	25)	120	30 USA		Yes No	
	g, Name and Address of Curren	I Registered Agent		10. Name and Address of New Re	gistered Agent	
	CORPORATION SYSTEM		81 Name			
	S. PINE ISLAND RD.		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
PLAI	NTATION FL 33324					
			63			
			84 City		85 Zip	Code
			'			
11. Pursuant l	to the provisions of Sections 607.050	2 and 607 1508, Florida Stat	utes, the above-named co	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of changing i	ls registered
	egisierea agent or bom, in the plate	or Fronta Such change was	s authorized by the corpora	ations board of directors. Thereby accep	or me appointment as	registered
enice or r agent. La	m familiar with, and accept the obligi	ations of Section 607.0505, I	Florida Statutes.			
	ri familiar with land accept the obligi	ations of Section 607.0505, I	Florida Statutes.			
agent La	militar with and accept the obligation and accept the obligation types of plasmarane of registered age		Florida Statutes. DTE: Registered Agent signature requ		DATE	
	She alone, typed or practical range of registered age OFFICERS AN	est and file if approable (No DISECTORS			DATE CERS AND DIRECTOR	RS IN 12
SIGNATURE	Support or preserve that the of registered age OFFICERS AN	niciand file if approbable (No	OTE. Registered Agent signature requ	uired when reinstating)	DATE	RS IN 12
SIGNATURE	PD MURGUIA, IGNACIO	est and file if approable (No DISECTORS	DTE. Registered Agent signature requ	uired when reinstating)	DATE CERS AND DIRECTOR	RS IN 12
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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 attachment with an address.

SIGNATURE:

SNATURE AND THE PHILED NAME OF SIGNING OFFICER ON DIRECTOR

1/11/97 113-881-1006

FILED

Apr 28 1997 8:00am

Secretary of State

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