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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 26 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

JDH	CONCRET	'E PUMPING, INC).						
Principal Plac	e of Business		M	ailing Address					- 10011/4 01(0 11040 1011) 00134 19021 8011 91011 01011 01031 91014 01041 01031
1368 ALAMET			1	1368 ALAMEDA DRIVE					
SPRING HILL FL 34609-2707 SPRING HILL FL 34609-5707							DO NOT WRITE IN THIS SPACE		
U\$									3. Date Incorporated or Qualified
									08/18/1986
2. Principal P	Place of Busin	ess	24	2. Mailing Address					4. FEI Number Applied For
21			26						59-2703491 Not Applicab
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional
22			27						Fee Required
City & Stat	10		City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip				Zip Country			,		1.00110.000
24	<u> </u>	25	29	2.10	30	JO: 11. j	_		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
<u></u>		and Address of Curre		tered Agent	[30]	\top			10. Name and Address of New Registered Agent
HARSHBARGER, JEFFREY						81	Ti	Vame	
	88 ALAMED						82 Street Addre		ess (P.O. Box Number is Not Acceptable)
SPRING HILL, FL						02	3	ancer Auule:	500 (1.0. DOX NUMBER IS NOT ADDEPTIONS)
		FL 34609-2707				83	<u> </u>		
-		. •				84	۲	City	85 Zip Code
						1	[•	FL " - ' ' ' '
11. Pursuant	to the provision	ons of Sections 607.05	02 and 6	07.1508, Florida Sta	tutes, the	above	e-n	amed corpo	oration submits this statement for the purpose of changing its registere on's board of directors. I hereby accept the appointment as registered
agent. I a	ım fam iliar wit	h, an d a ccept the oblig	ations o	f, Section 607.05 05 ,	Florida Si	atutes	y uri S.	ie corporatio	orra board of difectors. Thereby accept the appointment as registered
SIGNATURE								_	
	Signature, typed i	or printed name of registered ag					ent s	ignature required	d when reinstating) DATE
12.	<u> </u>	OFFICERS AN	ID DIREC	DELETE	13	TITLE			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	MADGHR	ARGER, JEFFREY				NAME			C change C Addition
STREET ADDRESS		AMEDA DRIVE					ADA	npecc	
CITY-ST-ZIP SPRING HILL FL						1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			
TITLE	91111101	TILL TE		DELETE		TITLE)1 - <u>1</u>	ır	Change Addition
NAME						NAME			
STREET ADDRESS						STREET	ADO	DRESS	
CITY-ST-ZIP						CITY-S		Į.	
TITLE				DELETE		TITLE			Change Addition
NAME					3.2	NAME			
STREET ADDRESS					3.3	STREET	ADE	DRESS	
CITY-ST-ZIP					3.4	CITY-S	ST - 2	ZIP .	
TITLE				DELETE	4.1	TITLE	_		☐ Change ☐ Additio
NAME					4 2	NAME		İ	
STREET ADDRESS					4.3	STAEET	ADI	DRESS	
CITY-ST-ZIP						CITY-S	T - Z	iP	
TITLE				DELETE	5.1	TITLE			Change Additio
NAME						NAME			
STREET ADDRESS					- 5	STREET		1	
CITY-ST-ZIP						CITY-S	T-Z	IP	
TITLE				DELETE		TITLE			☐ Change ☐ Additio
NAME						NAME			
STREET ADDRESS						STREET			
CITY-ST-ZIP					6.4	CITY-S	T-ZI	IP	

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 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.

1-14-98