SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J51315

(6)

NAPLES CONCRETE & MASONRY, INC.

FILED Sep 19 1997 8:00am Secretary of State



Principal Plac 6001 JANE LA NAPLES FL 33	NE	Mailing Address 6001 JANE LANE NAPLES FL 33942	E LANE		DO NOT WRITE IN THIS SPACE			
					Date Incorporated or Qualified 01/07/1987	1	of Last R	eport
	lace of Business Taylor Road	28. Mailing Address 26 5780 7	autor 1	and .	4. FEI Number 59-2758312	00/01	Ap	oplied For
Suite, Apt.		Suite, Apt. #, etc.	/ / · · · / ·		5. Certificate of Status Desired			Additional
City & State 23 Haples FL		City & State 28 Naples FL			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24 34/04	Country	Zip 29 3 4/09	Cour	stry A	8. This corporation owes or has Personal Property Tax due Ju	paid the curren	t year Inte	
	9. Name and Address of Curren	I Registered Agent			10. Name and Address of New I	Registered Age	nt	
	MELLO, MICHAEL A., JR., ESQ.			81 Name				
1027 FIFTH AVENUE NORTH NAPLES FL 33940				82 Street Add	lress (P.O. Box Number is Not Accept	able)		-
177 ELG 1 E 00970			<u> </u>	83				
				84 City			5 Zip (Code
11, Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	atutes, the ab	ove-named cor	poration submits this statement for the tion's board of directors. I hereby acc	FL purpose of ch	anging it	s registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505,	as autriorized , Florida Statu	tos.	mort's board or directors, i hereby acc	эрг и е а рроги	ment as	registered
SIGNATURE	Signature, typed or printed name of registered age	ot and title II applicable. (I	NO1: Registered	Agent signature requ	ired when reinstating)	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OF	ICERS AND DI	RECTOR	S IN 12
TITLE	PSD	DETEA	1.1 101	.E			Change	Addition
NAME '	DELDUCA, MICHAEL A.		1.2 NA					
STREET ADDRESS	2475 COACHHOUSE LANE NAPLES FL		1	EET ADDRESS				1
CITY-ST-ZIP TITLE	VI	DELETE	1.4 C(1 2.1 T(1)	Y-ST-ZIP			Change	Acdition
NAME	MORGAN, STEVE		2.1 HI	1			онапре	L. Acollion
STREET ADDRESS	2108 HIBISCUS ROAD ST.		1	EET ADDRESS				
CITY-ST-ZIP	FORT MYERS FL			Y-ST-ZIP				
TITLE		DELETE	3.1 TITI				Change	Addition
NAME		_	3.2 NA			_	٠	
STREET ADDRESS				EET ADORESS				
CITY-ST-ZIP				Y-ST-ZIP				ĺ
TITLE		DELETE	4.1 THT				Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP				
TITLE		DELETE	5.1 TIT	.E			Change	Addition
NAME			5.2 NA)	AE .				
STREET ADDRESS			5.3 STR	EET ADDRESS]
CITY-ST-ZIP			5.4 CIT	r-ST-ZIP				
TITLE		DELFTE	6.1 T(T)	E			Change	☐ Addition
NAME			6.2 NAM	AE .				
STREET ADDRESS			6.3 STR	EEJ ADDRESS				
CITY-ST-ZIP				-ST-ZIP				
14. I do heret	by certify that the information supplied in Indicated on this appual report or s	d with this filing does not qualify	ualify for the e	exemption state	d in Section 119.07(3)(i), Florida Statut my signature shall have the same le	tes. I further ce	rtify that t	the

Information indicated on this arinual report of supplemental angular/eport period and accurate and that my signature shall have the same legal effect as it made under of an an officer of director of the corporation or the receiver of trystoe episowifer 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 altradyrum with an address.

GNATURE: