MAY-17-1999 15:48 NAPLES CONCRETE
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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J51315

1. Corporation Name
NAPLES CONCRETE & MASONRY, INC.

Principal Place of Business	Mailing Address
5780 TAYLOR RD NAPLES FL 34109 US	5780 TAYLOR RD NAPLES FL 34109 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/07/1987

2. Principal Place of Business (21)

Suite, Apt. #, etc. (22): Ste #4

City & State (23):

Zip (24) Country (25):

2a. Mailing Address (26)

Suite, Apt. #, etc. (27): Ste. #4

City & State (28):

Zip (29) Country (30):

4. FEI Number: 59-2758312 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Election-Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BAVIELLO, MICHAEL A., JR., ESQ.
1027 FIFTH AVENUE NORTH
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name: Douglas A. Wood
82 Street Address (P.O. Box Number is Not Acceptable): 1000 Tamiami Trail North
83 #201
84 City: Naples FL 85 Zip Code: 34102

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 5/17/99
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DELDUCA, MICHAEL A.		1.2 NAME		
STREET ADDRESS	2475 COACHHOUSE LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	VT	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MORGAN, STEVE		2.2 NAME		
STREET ADDRESS	2108 HIBISCUS ROAD ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: X
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER, OFFICER OR DIRECTOR — Date — Daytime Phone #