

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Madlam
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONSRead Instructions on Other Side Before Making Entries
Make Check Payable to: Department of State

97 DEC 31 PM 3:23

1. Name and Mailing Address of Corporation: DOCUMENT #K17881

U.S. CONCRETE SYSTEMS CORPORATION
% Sarda, Nandy M.
80 Fisher Road, #5
Cumberland, RI 02864REINSTATEMENT 96-97
\$915

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address
Barnett Tower, Suite 1210Address
One Progress Plaza

City and State St. Petersburg, FL

Zip Code 33701

3. Date Incorporated or Qualified
To Do Business in Florida

03/07/88

4. FEI Number

59-2978615

FEI Number Applied For

FEI Number Not Applicable

5.

\$875 Additional Fee required
for a Certificate of StatusCERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
P/D	Sarda, Nandy M.	550 Washington Highway	Smithfield, RI 02912

800002402148--9

-01/15/98-01079--025

2300.00 *915.00

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent and/or Office

7. Name and Address of Current Registered Agent

Sarda, Nandy M.
177 Marina Del Rey Court
Clearwater, FL 34630

Name James N. Powell

Street Address (Do NOT Use P.O. Box Number)
Barnett Tower, Suite 1210Street Address (Do NOT Use P.O. Box Number)
One Progress PlazaCity and State
St. Petersburg

FL

Zip
33701

9 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Date 12-31-97

REGISTERED AGENT MUST SIGN

10. If the corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐SP 1/13/98
\$915

(See other side for additional information.)

11. Does this Corporation pay any intangible tax to the Dept. of Revenue under S.199.032, Florida Statutes

Yes ☐No ☒

(See other side for additional information.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Officer or Director

Date

12/31/97

Daytime Phone # 401-23-4000