2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNAT

SIGNATURE AND TYPED OR PRINTED MAINE OF SIGN

Sep 07, 2006 8:00 am Secretary of State **DOCUMENT # L03000049187** 09-07-2006 90036 007 ****50.00 1. Entity Name EASY PUMP CONCRETE SERVICES LLC Mailing Address Principal Place of Business 9 BRIDLEGATE DRIVE 9 BRIDLEGATE DRIVE CRAWFORDVILLE, FL 32327 CRAWFORDVILLE, FL 32327 09042006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1669607 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRATHWAITE, ISHMAEL DO NOT WRITE 9 BRIDLEGATE DRIVE CRAWFORDVILLE, FL 32327 IN THIS SPACE The above named entity suffrnits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registe Filing Fee is \$50.00 Due by September 6, 2006 MANAGING MEMBERS/MANAGERS 9. MGR MLE . NAME BRATHWAITE, ISHMAEL 9 BRIDLEGATE DRIVE STREET ADDRESS CITY-ST-ZIP CRAWFORDVILLE, FL 32327 TITLE NAME STREET ADDRESS CITY-ST-71P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE me NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with-this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accordate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustate empowered to execute this report as required by Chapter 608, Florida Statutes.

ING MANAGOIG MEMBER, OR AUTHORIZED REPRESENTATIVE

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Daytime Phone #