2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 29, 2008
Secretary of State

DOCUMENT# L04000058007

Entity Name: CONCRETE SOLUTIONS OF THE FLORIDA KEYS, LLC

Current Principal Place of Business:

7 FIRST AVENUE
BIG COPPITT KEY, FL 33040 US

New Principal Place of Business:

524 EATON STREET
SUITE 110
KEY WEST, FL 33040 US

Current Mailing Address:

P.O. BOX 5570
KEY WEST, FL 33045 US

New Mailing Address:

FEI Number: 75-3163248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALENZUELA, SALLY JO J
812 SOUTH STREET
#2
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: VALENZUELA, STACE V
Address: 812 SOUTH STREET #2
City-St-Zip: KEY WEST, FL 33040 US

Title: MGRM ( ) Delete
Name: VALENZUELA, SALLY J
Address: 812 SOUTH STREET #2
City-St-Zip: KEY WEST, FL 33040 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: VALENZUELA, STACE V
Address: 524 EATON STREET, SUITE 110
City-St-Zip: KEY WEST, FL 33040 US

Title: MGRM (X) Change ( ) Addition
Name: VALENZUELA, SALLY J
Address: 524 EATON STREET, SUITE 110
City-St-Zip: KEY WEST, FL 33040 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SALLY JO VALENZUELA MGRM 01/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date