## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L39591

1. Corporation Name

**B & M CONCRETE SERVICES, INC.** 

Principal	Place	of	Business

Mailing Address

## **FILED** Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90177 002 \*\*\*150.00



		9221 53RD WAY NORTH PINELLAS PARK FL 34666		·	
PINELLAS PARA	K PL 34000	PINELLAS PANK EL 34000		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualifed	
				12/26/1989	
2. Principal Pl	lace of Business	2a. Mailing Address	<del>.</del>	4. FEI Number	Applied For
21 750		26 ( . S. Bs. ?	276	59-2989721	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	<del></del>		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be
23 5+	Petersburg Tu	28 Pinellea 13	れん。トー	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	ntangible
<b>33</b> 3	702 25 USA	29 33780 30	USA	Personal Property Tax.	<del>∑⊒Y</del> es □No
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Registere	d Agent
			81 Name		
	ZLER, MARK S.		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
	53RD WAY NORTH		750	947 Avenue P. A	210
PINE	LLAS PARK FL 34666		83		
			04 00	·	85 Zip Code
			84 City	Perturburg F	L 85 Zip Code 33フッマ
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpose of	of changing its registered
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligatio	Florida, Such change was auth	orized by the corporati	ion's board of directors. I hereby accept the app	pintment as registered
-	/		Statutes.	11/1 / 2.4-	99
SIGNATURE	MAXK 5. Decicles Signature, typed or printed name of registered agent a	L PRES/DYNF. nd title if applicable. (NOTE: Re	gister d Agent signature require	ed when reipolating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE		Change Addition
NAME	DREIZLER, MARK S.		1.2 NAME		
STREET ADORESS	9221 53RD, WAY N.		1.3 STREET ADDRESS	750 94" Ave. N. # 210 St. Petershurs, FL 337	
CITY-ST-ZIP	PINELLAS PARK FL 34666		1.4 CITY-ST-ZIP	St. Petershorg FL 337	'o 'L
TITLE	VPS	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DREIZLER, PEGGY D.	, <del></del>	2.2 NAME		
STREET ADDRESS	9221 53RD WAY N.		2.3 STREET ADDRESS	•	,
CITY-ST-ZIP	PINELLAS PARK FL		2. 4 CITY-ST-ZIP	•	
TITLE	TINCLEAD TAINTE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		<b>—</b>	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	410	☐ Change ☐ Addition
			4.2 NAME		
NAME			}	•	
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		☐ Criange ☐ Addition
NAME			5.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP			54 CITY-ST-ZIP	-	Chases DAddis-
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	•	
STREET ADDRESS			6 3 STREET ADDRESS		
- 1			S A CITY ST ZID		,

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: