## 2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

## FILED **DOCUMENT # L43828** Jan 28, 2000 8:00 am 1. Entity Name **Secretary of State** ALL STATE CONCRETE CORPORATION 01-28-2000 90068 018 \*\*\*158.75 Principal Place of Business Mailing Address 5759 WESTVIEW DRIVE 5759 WESTVIEW DRIVE ORLANDO FL 32810-3940 ORLANDO FL 32810-3940 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2988103 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 囨 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STALEY, BRADLEY Street Address (P.O. Box Number is Not Acceptable) 5759 WESTVIEW DRIVE ORLANDO FL 32810 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Pavable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition TITLE ☐ Delete TITLE Change STALEY, BRADLEY A. NAME NAME STREET ADDRESS 5759 WESTVIEW DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete V D FETTE, GREGORY L. NAME FETTE, GREGORY L. STREET ADDRESS 8525 STEER LAKE ROAD STREET ADDRESS 8101 Gilliam Road CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Apopka, FL STD ☐ Delete ☐ Addition TITLE TITLE FETTE, GREGORY L. NAME FETTE, GREGORY L. 8101 Gilliam Road 8525 STEER LAKE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Apopka, FL, 32703 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS No. 3 5 35. CITY-ST-ZIP. CITY-ST-7IP 13. 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 report or supplemental 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 11 or Block 12 if chapter 607, provided or on an attachment with all other literage of the corporation of the