2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L79489

1. Entity Name
ZODY CONCRETE, INC.



Principal Place of Business Mailing Address

2088 PINNACLE CIRCLE SOUTH PALM HARBOR, FL 34684 US

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FILED Apr 16, 2007 08:00 A Secretary of State



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03302007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-3021927 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOZMOSKI, JOHN JR. 600 BY PASS DR STE 200 CLEARWATER, FL 34624

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	urpose of changing its registe	red office or r	egistered agent, or bo	oth, in the State of Florida. I am familia	r with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registe	red Agent signaturs	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	04/25/07-80069-013	150.00
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD ZODY, WILLIAM G. 2088 PINNACLE CIRCLE COUTH PALM HARBOR, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ZODY, JUANITA 2088 PINNACLE CIRCLE SOUTH PALM HARBOR, FL					
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE			•	IN	THIS SPACE	

12. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legat 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

SULANITA J. 2004
SUNATURE AND TYPED OF PRINTED THATE OF SIGNING OFFICER OR DIRECTOR

4/12/07

727-785-5703