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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L88599

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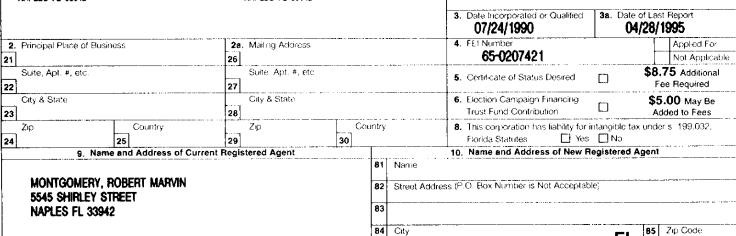
Corporation Name

MONTY CONCRETE, INC.

Principal	Place	of	Business

Mailing Address

5545 SHIRLEY STREET NAPLES FL 33942 5545 SHIRLEY STREET NAPLES FL 33942



11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby account the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE					
	Signature hypercomposited came of reusters happy and thin has possess OFFICERS AND DIRECTORS		gistered Agorit signature req. [13.	OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	IDC INI 12
12.	P OFFICERS AND DIRECTORS	DELETE	1 11111	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	Addition
TITLE	•	Decer		Change	
NAME	MONTGOMERY, ROBERT MARVIN		1.2 NAME		
STREET ACORESS	5545 SHIRLEY STREET		1.3 STHEET ADDRESS		
CITY - ST - ZIP	NAPLES FL		1.4 CITY - ST - ZIP		
TITLE	· · ·	DELETE	2 1 TILE	☐ Change	Addition.
NAME	Montgomery, Robert M Jr		2.2 NAME		
STREET ALIDRESS	5301 17TH AVE S. W.		2.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		2.4 CIFY - S1 - ZIF		
TITLE		□ DELETE	3 1 TIFLE	☐ Change	☐ Addition
NAME			3 2 NAME		
STREET AUDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIF		
TITLE		DELETE	4 1 TITLE	☐ Change	☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-SI-ZIP			4.4 CITY S1 - ZIP		
TITLE		DELETE	5 1 T TEF	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY - ST - ZIF			5.4 CiTY - ST - ZiP		
1:TLE		DELETE	6 1 TITLE	Change	☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - \$1 - 7/P			64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 eath, that I am an officer or director of the corporation or the reveiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if chapter 6 or on an attachment with an address.

SIGNATURE;

SIGNATURE AND THEE ON PRINTED NAME OF SIGNAND OF FICER OR DIRECTOR

5-14-96

941-597-2486 Depos Plane K R2E034 (12/95)