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

Feb 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT # L97000** (8)PETROZELLA CONCRETE, INC. Principal Place of Business Mailing Address JOSO HAY TATH AVE 7650-NW-74TH_AVENUE TAMARAG-FL-00021 TAMARAC PL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/29/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 629 NE 35 629 21 NE 26 65-0223247 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be DANIA $A \iota \iota \iota A$ 23 28 Trust Fund Contribution Added to Fees BrowAre Country 8. This corporation owes or has paid the current year Intangible 300V Kroward Yes □ No 25 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name PETROZELLA, JOSEPH, III 7650 NW 74 AVE. 82 Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33321 83 B4 City Zip Code 85 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TiTLE 1.1 TITLE Change trozellA, Ioseph PETROZELLA, JOSEPH 12 NAME NAME 7650 NW 74 AVE. 19 NE 3 5 1.3 STREET ADDRESS STREET ADDRESS TAMARAC-FL-CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE PETROZELLA, JOSEPH, III DetrozellA 2.2 NAME NAME 7650 NW 74 AVE-STREET ADDRESS 2.3 STREET ADDRESS TAMARAC FL-City-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY-ST-ZIP DELETE Change Addition TITLE 5.1 TiTL€ NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 officer or director of the corporation or the receiver or trustee encoursed to execute this report as required by Chapter 607, Florida Sfatues; and the

Block 12 or Block 13 if changed, or on an

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under oath; that I am an