SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE) CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (5)DOCUMENT # M17542 PERALES CONCRETE PUMPING CORP. Mailing Address Principal Place of Business 3440 SW 137 AVE 3440 SW 137 AVE MIAMI FL 33175 MIAM) FL 33175 3a. Date of Last Report 3. Date Incorporated or Qualified 04/28/1995 07/02/1985 Applied For FEI Number 2a. Mailing Address 2. Principal Place of Business 59-2550443 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199 032. Country Zip Country Zin Yes 🔲 No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PERALES, FRANCISCO Street Address (P.O. Box Number is Not Acceptable) 3440 SW 137 AVE **MIAMI FL 33175** 83 85 Zip Code 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Stiple even dypenies prost an investor in terestral pertandance dapplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8)OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE TITLE CR2E034 12 NAME PERALES, FRANCISCO NAME 3440 SW 137 AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY - ST - ZIF Change Addition DELETE 21711.8 TITLE NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST ZIP CITY - \$1 - ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4 CHY - \$1 - ZIP CITY - ST - ZIP Change Addition DELETE 4 1];TLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 THUE THILE 5.2 NAME NAME 5.3 STREE! ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 61 TIFLE TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - \$1 - 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 oath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Brock 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRINKE

6. >1-96 (705) 554-7471