

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M65614

FILED
Feb 01, 2006
Secretary of State

Entity Name: PRODUCTION CONCRETE FINISHERS, INC.

Current Principal Place of Business:

4849 SE 110 STREET
STE 49
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

4849 SE 110 STREET
STE 49
BELLEVIEW, FL 34420

New Mailing Address:

FEI Number: 59-2870672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, WILLIAM ALLAN
1531 SE 36TH AVE.
OCALA, FL 34471 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SZKUDLAREK, BRIAN
Address: PO BOX 3158
City-St-Zip: BELLEVIEW, FL 34421

Title: VP (X) Delete
Name: SZKUDLAREK, THAD
Address: 4849 SE 110 STR STE 49
City-St-Zip: BELLEVIEW, FL 34420

Title: S () Delete
Name: SZKUDLAREK, DARLENE
Address: 4849 SE 110 STR STE 49
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SZKUDLAREK, BRIAN
Address: PO BOX 3158
City-St-Zip: BELLEVIEW, FL 34421

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S,T (X) Change () Addition
Name: SZKUDLAREK, DARLENE
Address: 4849 SE 110 STR STE 49
City-St-Zip: BELLEVIEW, FL 34420

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN SZKUDLAREK

P

02/01/2006

Electronic Signature of Signing Officer or Director

_____ Date