File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE FILED SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** 98 MAR 18 PM 12: 16 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # M9600000048 Principal Place of Business Address H, B & J CONCRETE COMPANY, L.L.C. 5435 JUSTINE WAY 5435 JUSTINE WAY WINTER PARK FL 32792 WINTER PARK FL 32792 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 02/16/1996 MD Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 52-1957693 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 05/01/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Namé DEY, WILLIAM 5435 JUSTINE WAY Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32792 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. COLOR Accopting Appointment) (NOTE Registered Agent signature required when reinstalling) SIGNATURE DATE _ 10. Title **Business Street Address** Managing Members/Managers City, State and Zip Code MGR ARAUJO, HECTOR 18213-A FLOWER HILL WAY GAITHERSBURG MD 5435 Justine Way What Rot, A. 32792 19217 Fox Chapel Rand MGRM Germantour Md. 20876 **700002464267-**-3 -03/20/93--01126--011 ****188.75 ****188.75

11. I do hereby certify that the information supplied with this filing 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

William XIII William Dey Signature and typed on Printyu name of signing managing member on manager