	PLEASE READ	ALL INST	BUCTIONS	BEFORE C	OMPLETI	ING THIS EQ	BM.	
e Gr	PLICATION FOR STATEMENT	FLORIDA	DEPARTMEN Katherine Ha Secretary of S VISION OF CORPOR	IT OF STATE rris tate	•	UB FILED	in a	
DOCUMENT # P0000064578  1. Corporation Name					01 NOV -5 AM 9: 29			
A. M. CONCRETE PUMPS & PARTS, INC.					SECRETARY OF STATE TALLAHASSEE FLORIDA			
APOPKA FL 32703 AFOPKI P. O.			FRUND 16 FX 32763 BOX 607460 ANDO, FL 32860					
New Principal Office Address, If Applicable     3. New Principal Office Address, If Applicable			w Mailing Office Address, If Applicable  Apt. #, etc.		Date Incorporate To Do Busin	orated or Qualified less in Florida	07/05/2000	
City & State		City & State			5. FEI Number	656194	Applied For Not Applicable	
Zip	Zip Country Zip		Country 6.		-	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officers Street Address of Each								
Title(s)	Title(s) 2 and/or Directors		3 Officer and/or Director			City / State / Zip		
D	ANDERSON, ROGER A 3102 OVERLAN			id RD	APOPKA FL 32703			
D	LARGO, HENRY	321 BLUE QUAIL CT		<b>A</b> 1.	BEDFORD TX 76021			
D	LARGO, SHARLENE	321 BLUE QUAIL CT			BEDFORD TX 76021			
					71	-12/11/01 -12/11/01 ****150.	1-93878 101084005 00 ****150:00	
	8. Name and Address of Current I	Registered Ager	nt		9. Name and	ddress of New Regist	ered Agent	
ANDERSON, ROGER A-				Name				
3102 OVERLAND RD					Street Address (P.O. Box Number is Not Acceptable)			
APOPKA FL 32703				Suite, Apt. #, Etc.				
City					State Zip Code			
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent Date 11-2-01  REGISTERED AGENT MUST SIGN								
this reins owed by	that I am an officer or director or the receivistatement application, the reason for disso the corporation have been paid and the repplication is true and accurate, and my sign	llution has been d names of individu	eliminated, the corpo als listed on this for	rate name satisfies in do not qualify for a	the requirements an exemption und	of section 607.0401 or (	617.0401, F.S., that all fees	

11-2-01 407-466-645/

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## A.M. Concrete Pumps & Parts, Unc.

P.O. Box 607460 ORLANDO, FL 32860-7460 (407) 947-5389 / PHONE (407) 445-3928 / FAX

November 2, 2001

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attention: Leslie

This is to follow-up our phone conversation of October 18, 2001. You may recall from our conversation that when the dissolution notice arrived I was going out of state to get married. You assured me that I could overlook this notice until I returned hence the two-week delay since our conversation until now.

The notice of dissolution was the first thing from your office that came to me. It had been sent to the wrong address but did get forwarded to us. Apparently, anything you sent previously was lost. The address used was the <u>place</u> of business. No mail is delivered or received at that location. Please change your records so that all future mailings are sent to the correct <u>mailing</u> address:

A.M. Concrete Pumps & Parts, Inc. P.O. Box 607460 Orlando, FL 32860-7460

You told me to write a letter of explanation and to submit the application with a check for the \$150 fee, ignoring the penalty. This is the letter; the application and check are enclosed. Also enclosed for your reference is a photocopy of the front of the mailing, which was misaddressed, over which the Post Office put the forwarding label.

If you have questions or need additional information you can reach me by phone during the day at 407-466-6451 or by mail at the above mailing address.

Thank you for your help and understanding.

Sincerely.

Roger/A. Anderson President/Owner