

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90363 014 ***150.00

DOCUMENT # P00000116856

1. Entity Name
A MITCHELL CONCRETE INC.



00060010

Principal Place of Business
**3773 CENTRAL AVE STE A481
ST PETERSBURG, FL 33713**

Mailing Address
**3773 CENTRAL AVE STE A481
ST PETERSBURG, FL 33713**

2. Principal Place of Business
6001 - Leeland St. So

3. Mailing Address
6001 Leeland St. So

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012006 Chg-P CR2E034 (11/05)

City & State
St. Petersburg, FL

City & State
St. Petersburg, FL

4. FEI Number
65-1070385

Applied For
Not Applicable

Zip
33715

Country
Pinellas

Zip
33715

Country
Pinellas

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WINEBRENNER, J M
3773 CENTRAL AVE STE A481
ST PETERSBURG, FL 33713**

Name
ANDREW MITCHELL, SR

Street Address (P.O. Box Number is Not Acceptable)
6001 - Leeland St. So

City
St. Petersburg **FL** Zip Code
33715

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Andrew Mitchell Sr.

2-01-06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P D
MITCHELL, ANDREW SR
6001 LEELAND ST S
ST PETERSBURG, FL 33715** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
MITCHELL, CYNTHIA
6001 LEELAND ST SOUTH
SAINT PETERSBURG, FL 33715** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andrew Mitchell Sr. President*

2-1-06