

FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90010 005 ***150.00

DOCUMENT # P01000049266

1. Entity Name

MHD CONCRETE CONSTRUCTORS, INC.



Principal Place of Business

PO BOX 4154
MIAMI BEACH FL 33141

Mailing Address

~~3610 NW 10TH ST~~
~~LAUDERDALE FL 33041~~
PO BOX 4154
MIAMI BEACH FL 33141



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 65-1118693

Applied For

Not Applicable

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

GARSON, K

~~3610 NW 10TH ST~~
~~LAUDERDALE FL 33041~~
PO Box 4154
MIAMI BEACH FL 33141

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2007 Fee will be \$350.00~~

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D MEYERS, H
~~3610 NW 10TH ST~~
~~LAUDERDALE FL 33041~~
PO Box 4154
MIAMI BEACH FL 33141

☐ Delete

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

TITLE
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STREET ADDRESS
CITY - ST - ZIP
D GARSON, K
~~3610 NW 10TH ST~~
~~LAUDERDALE FL 33041~~
PO Box 4154
MIAMI BEACH FL 33141

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

11 Moore Prec

5-1-08

5/1/08.

MHD CONCRETE CONSTRUCTORS INC.
ATTACHMENT

40107876

P01000049266

TO WHOM IT MAY CONCERN,

FOR THE PAST YEARS YOU NEVER SEND
MY CORPORATION THE FORM TO PAY THIS
TAX. I ALWAYS CALL AND NO ONE MAKES
IT TO ME AT MY ADDRESS.

P.O. Box 4154
MIAMI BEACH, FL 33141

THEREFORE I HAD TO MAKE UP A FORM
FROM MY LAST YEAR TAX RETURN.

I AM ENCLOSING MY CHECK FOR THE FEE
OF \$150.00. PLEASE DON'T DO THIS TO ME
AGAIN. AS YOU CAN SEE THE ADDRESS ON
YOUR FORM IS CORRECT BUT IT NEVER
COMES.

PLEASE TAKE CARE OF THIS MATTER.

VERY TRULY YOURS,

H. Meyers Pres.