## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 22, 2004 8:00 am Secretary of State **DOCUMENT # P01000064558** 1. Entity Name 04-22-2004 90012 030 \*\*\*150.00 WEBER CONCRETE, INC. Principal Place of Business Mailing Address 2575 PARTIN SETTLEMENT RD. 2575 PARTIN SETTLEMENT RD. TICOCURC KISSIMMEE, FL 34744 KISSIMMEE, FL 34744 2. Principal Place of Business 3. Mailing Address 4142 Winterset Dr. 4142 Winterse+Dr Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Orlando Orlando 59-3730531 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 32832 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEBER, DANIEL 2575 PARTIN SETTLEMENT RD. Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE, FL 34744 14142 Winterset City 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PD TIT! F Delete ☐ Change ☐ Addition WEBER, DANIEL NAME NAME STREET ADDRESS 2575 PARTIN SETTLEMENT RD. STREET ADDRESS KISSIMMEE, FL 34744 CITY-ST-ZIP CITY-ST-ZIP VTD TITLE Delete TD TITLE Change ☐ Addition Weber, Richard E. 14142 Winterset Dr. WEBER, RICHARD E NAME NAME STREET ADDRESS 14142 WINTERSET DR. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32832 CITY-ST-ZIP orlando FL 32832 SD TITLE ☐ Delete TITLE Change Change ☐ Addition Weber, James L. 2060 Running Horse Trail WEBER, JAMES L NAME NAME 1827 RICHARDSON DR. STREET ADDRESS STREET ADDRESS CITY-ST-7IP ST. CLOUD, FL 34771 CITY-ST-ZIP ST. Cloud, FT 34771 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I 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 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 attachinent with an address, with all other like empowered. ichard E. Weber, Pres. 4/20/04 407 **SIGNATURE**

FILED