

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90285 032 ***150.00

DOCUMENT # **PO10000107500** ✓

1. Entity Name

**A. K. S. CONCRETE PUMPING
SERVICES INC.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11801 MANHAN DR.

Suite, Apt. #, etc.

3. Mailing Address

11801 MANHAN DR.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
TALLAHASSEE, FL

City & State
TALLAHASSEE, FL

4. FEI Number

522362555

Applied For

Not Applicable

Zip
32309

Country
LEON

Zip
32309

Country
LEON

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

ANDRES SALDIVAR JR.

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

11801 MANHAN DR.

City

TALLAHASSEE

FL

Zip Code

32309

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.

SIGNATURE

Andres Saldivar Jr.

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

(NOTE: Registered Agent signature required when reinstating)

4/30

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
PRESIDENT
NAME
ANDRES SALDIVAR JR.
STREET ADDRESS
11801 MANHAN DR.
CITY-ST-ZIP
TALLAHASSEE FL.

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowers.

SIGNATURE:

Andres Saldivar Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #