

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVE.

FILED

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000119798

1. Corporation Name

Bud's CONCRETE Inc.

2. Principal Office Address

6734 LAKEVILLE RD

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 550

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32818

Country

USA

City & State

SORRENTO FL

Zip

32776

Country

USA

7. Name and Address of Current Registered Agent

Name

JERRY RIDDELL JR.

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

105 MAGNOLIA LANE

Suite, Apt. #, Etc.

City

EUSTIS

State

FL

Zip Code

32726

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date

6/29/06

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--|
| P | JERRY RIDDELL JR. | 105 MAGNOLIA LANE | EUSTIS FL 32726 |
| VP | JERRY RIDDELL III | 140 NABERSNAM DR. | Longwood FL 32779 |
| S/T | Tammy-Jo RIDDELL | 105 MAGNOLIA LANE | EUSTIS FL 32726 |
| | | | |
| | | | 6000077141366 07/07/06--01024--024 ***1050.00 |
| | | | |

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Tammy-Jo RIDDELL

SIGNATURE: Tammy-Jo Riddell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-29-06 407-832-6770

Date

Daytime Phone #

7/6/06

REINSTATEMENT 04-06
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
59-3761234

Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required
for a Certificate of Status