

2006 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED

06 MAR 28 PM 12: 1.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03272006 REIN-P CR2E098 (11/05)

DOCUMENT # P02000018299

1. Entity Name
FRANK CONCRETE PUMPING CORP.



Principal Place of Business

3405 W 14 AVENUE
HIALEAH, FL 33012

Mailing Address

3405 W 14 AVENUE
HIALEAH, FL 33012

2. Principal Place of Business

645 W 31 ST

3. Mailing Address

645 W 31 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH FL

City & State

HIALEAH FL

4. FEI Number

65-2651515

Applied For

Not Applicable

Zip

33012

Country

US

Zip

33012

Country

US

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, FRANCISCO
3405 W 14 AVENUE
HIALEAH, FL 33012

7. Name and Address of New Registered Agent

Name
FRANCISCO RODRIGUEZ

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

645 W 31 ST

HIALEAH FL

City

FL

Zip Code

33012

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 \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE: D Delete
NAME: RODRIGUEZ, FRANCISCO
STREET ADDRESS: 3405 W 14 AVENUE
CITY-ST-ZIP: HIALEAH, FL 33012

TITLE: VP Delete
NAME: RODRIGUEZ, JORGE
STREET ADDRESS: 3405 W 14TH AVENUE
CITY-ST-ZIP: HIALEAH, FL 33012

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Change Addition
NAME: 645 W 31 ST
STREET ADDRESS: HIALEAH FL (address change only)
CITY-ST-ZIP: 33012

TITLE: Change Addition
NAME: 645 W 31 ST
STREET ADDRESS: HIALEAH FL (address change only)
CITY-ST-ZIP: 33012

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

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
REINSTATEMENT 05-06-06
800069973348
04/10/06--01087--007 **300.00

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #