## **2003 FOR PROFIT CORPORATION**

UN	IFORM BUS	INESS	REPOR1	<u> </u>	JBR)						
DOCUMENT # P02000027777							FILED				
CHARLE & SONS CONCRETE SERVICES, INC.							03 OCT 27 PF	2: 15			
Principal Plac 3516 39 ST E	ce of Business		Mailing Address 3516 39 ST E				SECRETARY OF TALLAHASSEE F	STATE LORIDA			
BRADENTON	FL 34208	BRAD	ENTON FL 34208								
2. Principal F	Place of Business	3. Mai	3. Mailing Address								
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				REINSTATE	MEN	H NGES	<u>7</u>	
City & Stat	е	City	City & State			4. 1	FEI Number <i>01-062857</i>	<u></u>		plied For t Applicable	-
Zip Country		Zip	Zip		Country		Certificate of Status Desired	┌ \$	8.75 Addi		
6. Name and Address of Current Registered Agent					A1	7. N	Name and Address of New Reg	istered Ag	ent		1
CANNON, CHARLES					Name						]
3516 39						Street Address (P.O. Box Number is Not Acceptable)					
BRADENTON FL 34208											
				٠	City			FL	Zip Code	•	
	named entity submits this state tions of registered agent.	ement for the purp	ose of changing its r	egistere	ed office or r	egistered ag	ent, or both, in the State of Florid	a. I am far	niliar with, a	and accept	
SIGNATURE											
	Signature, typed or printed name of registe	ered agent and title if app	licable. (NOTE:	Registere	d Agent signature	required when re	ninstating)	DATE			-
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of							Election Campaign Finar     Trust Fund Contribution.	cing		May Be to Fees	
10.		RS AND DIRECTO	RS	11,		AD	DITIONS/CHANGES TO OFFIC	ERS AND E	PIRECTORS		1,
TILE NAME STREET ADDRESS	CANNON, CHARLES 3516 39TH STREET EAST		☐ Delete					[	Change	☐ Addition	00/4/ 400-
CITY-ST-ZIP TILE	BRADENTON FL 34208		□ Delete	TITLE	-				Change	Addition	1 6
AME			NAM	E							
STREET ADDRESS SITY-ST-ZIP	δ			ET ADDRESS -ST-ZIP							
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CITY-ST-ZIP					-ST-ZIP						
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TITY-ST-ZIP			☐ Delete	CITY	-ST-ZIP				☐ Change	Addition	-
IAME			NAMI	<b>:</b>			L	\$11411go	sadmoli		
TREET ADDRESS					et address -St-Zip						
ITLE			☐ Delete	TITLE				[	Change	Addition	1
IAME TREET ADDRESS				NAMI STRE	ET ADDRESS						
ITY-ST-ZIP				CITY-	-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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 attachment with an address, with all other like empowered.

SIGNATURE: ⋈

(941)812-2482 Daytime Phone #

10/25/03 Date

DIVISION OF CORPORATIONS UBR FILINGS P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir/Madam;

I am writing in regards to a second UBR sent to me for filing. I have filed one for this year already.

A called had been made to your office to inquire if you had received the report filing in May, '03. I was told that the first report did not have the FEI number included and to send in this letter along with copy of the check, explaning the situation.

Attached you will find a copy of a cancelled check (indorsed by your office) showing that I have previously filed my UBR.

Thank you for your attention to this matter.

Yours truly,

Charles Cannon