2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# Phohhhhaaooa



FILED Mar 19, 2003 8:00 am { Secretary of State

1. Entity Name C & A CONCRETE PUMPING CORPORATION						03-19-2003 90123 024 ***150.00	
Principal Pla 3115 SW 98 MIAMI FL 33		s	Mailing Address 3115 SW 98 CT MIAMI FL 33165				E21 1 4 B 4
2. Principal Place of Business 3/15 SW 98 CF			3. Mailing Address		<u> </u>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES	
City & State Miami Fl.			City & State Miami Fl			4. FEI Number Applied Not Ap	l For plicable
Zip 3 3/35		Country USA	Zip 33:35	Cour	ntry SA	5. Certificate of Status Desired \$8.75 Addition Fee Required	al
6. Name and Address of Current Registered Agent					Name	7. Name and Address of New Registered Agent	
ACOSTA,	JESUS		ا المانية المانية			and the second of the second	ŀ
3115 SW 98 CT					Street Address (I	P.O. Box Number is Not Acceptable)	
MIAMI FL					****		
					City	FL Zip Code	
8. The above the obliga	e named entit tions of regist	y submits this statement for ered agent.	the purpose of changing its	register	ed office or register	ed agent, or both, in the State of Florida. I am familiar with, and a	accept
SIGNATURE		or printed name of registered agent a	nd title if applicable. (NOT	E: Registere	d Agent signature required	when reinstating) DATE	_
	FILE NOW!	FEE IS (150.00)					
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Fiorida Department of State						9. Election Campaign Financing \$5.00 M. Trust Fund Contribution. Added to F	ay Be-
10.		OFFICERS AND I	<u> </u>	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	1
TITLE	D		<u> </u>	11.			1 Addition
TITLE NAME	ACOSTA,	JESUS	DIRECTORS	TITLE NAMI	E		
TITLE	ACOSTA, 1743 SW	JESUS 3 ST.	DIRECTORS	TITLE NAMI STRE	E ET ADDRESS		
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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 attachment with an address, with all other like empowered.

SIGNATURE:

Date

Daytime Phone #