

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089440

FILED
Apr 29, 2008
Secretary of State

Entity Name: PERFORMANCE CONCRETE SYSTEMS, INC.

Current Principal Place of Business:

5720 ZIP DRIVE, SUITE 2
FORT MYERS, FL 33905

New Principal Place of Business:

10080 INTERCOM DRIVE
UNIT A-3
FORT MYERS, FL 33913

Current Mailing Address:

PO BOX 128
ESTERO, FL 33928

New Mailing Address:

FEI Number: 82-0560397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLON, DWAYNE E
17389 ALLENTOWN ROAD
FORT MYERS, FL 33967 US

Name and Address of New Registered Agent:

DILLON, DWAYNE E
16751 OAK GROVE CT.
ALVA, FL 33920 US

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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: DILLON, DWAYNE E
Address: 17389 ALLENTOWN ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: PD () Delete
Name: GEREN, JR., DAVID A
Address: 18615 CEDAR DRIVE E
City-St-Zip: FORT MYERS, FL 33967

Title: S () Delete
Name: DILLON, LEANNE B
Address: 17389 ALLENTOWN ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: T () Delete
Name: GEREN, CORA D
Address: 18615 CEDAR DRIVE E
City-St-Zip: FORT MYERS, FL 33967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: DILLON, DWAYNE E
Address: 16751 OAK GROVE CT.
City-St-Zip: ALVA, FL 33920

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DILLON, LEANNE B
Address: 16751 OAK GROVE CT.
City-St-Zip: ALVA, FL 33920

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEANNE DILLON

S

04/29/2008

Electronic Signature of Signing Officer or Director

Date