2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED May 21, 2007 08:00 A Secretary of State DQCUMENT # P02000102085 1. Entity Name BEAVER CONCRETE, INC. Principal Place of Business Mailing Address 1721 NORTHWEST 1ST AVENUE 1721 NORTHWEST 1ST AVENUE CAPE CORAL FL 33993 CAPE CORAL FL 33993 2. Principal Place of Business - No P O. Box # 3. Mailing Address Suite Apt. # oto Suito Apt. # old 1st MOORE CR2E034 (10/06) 4. FEI Numbor City & State City & State Applied For 13-4224825 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEAVER, KENNETH S 1721 NORTHWEST 1ST AVENUE Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33993 City Zin Codo 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 r applicable. (NOTE: Registered Agent signature required when reinstature) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PTD THE ☐ Delete HEE ☐ Change Addition BEAVER, KENNETH S NAM NAME 1721 NORTHWEST 1ST AVENUE STREET ADDRESS STREET ADDRESS CAPE CORAL FL 33993 U00000765149 CITY-SI-ZIP CHY-ST-7IP 11111 TITLE Delete NAM NAMI STREET ADDRESS STREET ADDRESS CRY-ST-ZIP CHY-SI-7IP Addition TITLE TITLE Change ☐ Delete NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZIP HIII Defete HHE ☐ Change Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CUY-SI-7IP CHY-SI-7IP TITLE ☐ Change ☐ Addition Defete HITTE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-7IP CITY-ST-7IP 11111 Change Addition DHE □ Detele NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules: 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: Yemeth S. Benner Kenneth S. Beaver 4-29-07 239-458-0890