2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000029764

1. Entity Name

TROPICAL CONCRETE STAMPING & PUMPING, CORP.



FILED
Jan 17, 2008 08:00 AM
Secretary of State

Principal Place of Business

646 E 46 ST HIALEAH, FL 33013 Mailing Address

646 E 46 ST

HIALEAH, FL 33013



01152008

No Chg-P

CR2E034 (11/05)

4. FEI Number 61-1445366 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUERGO, JUAN CARLOS 646 E 46TH ST HIALEAH, FL 33013

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered office o	r registered agent, or bo	th, in the State of Florida. I am familiar with, and accept .
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 \$150:00 - After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be- Added to Fees	
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CORDERO, ELISA 646 E 46TH ST HIALEAH, FL 33013			
TITLE	PSD		•	· ·
NAME	HUERGO, JUAN C		•	U00000000000
STREET ADDRESS	646 E 46TH STREET			U00000787722 01/18/08-80012-004 150.00
CITY-ST-ZIP	HIALEAH, FL 33013			01/10/00-00017-004 190:00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE			IN "	THIS SPACE
NAME	•	·	#1 W	IIIO OI AOL
STREET ADDRESS				ŀ
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TITLE NAME				
STREET ADDRESS			. :	
CITY-ST-ZIP		ľ		
TITLE				

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:

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-08

786-255-450

Daytime Phone #