2008·FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000034501

1. Entity Name

P.C. SHOTCRETE, INC

Principal Place of Business	Mailing Address
13356 SW 46TH LANE MIAMI, FL 33175	13356 SW 46TH LANE MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE

03122008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
45-0509060	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PARRADO, PEDRO
13356 SW 46TH LANE
MIAMI, FL 33175

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IN THIS SPACE

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 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

U00000361420
04/03/08--00008--017 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PARRADO, PEDRO
STREET ADDRESS	13366 SW 46TH LANE
CITY-ST-ZIP	MIAMI, FL 33175

TITLE	ST
NAME	PARRADO, PEDRO
STREET ADDRESS	12505 SW 189TH ST
CITY-ST-ZIP.	MIAMI, FL 33177

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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: _____   3/17/08   (305)525-4187

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #