

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-09-2004 90026 050 ***150.00

DOCUMENT # P03000039909 1. Entity Name E & R CONCRETE, INC.			
Principal Place of Business 626 HUNTINGTON STREET BRANDON, FL 33511		Mailing Address 626 HUNTINGTON STREET BRANDON, FL 33511	
2. Principal Place of Business 11826 Brenford Crest Dr Suite, Apt. #, etc.		3. Mailing Address 11826 Brenford Crest Dr. Suite, Apt. #, etc.	
City & State Riverview, FL Zip 33569		City & State Riverview, FL Zip 33569	
4. FEI Number 753111429		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECERRA, EVELIA 626 HUNTINGTON STREET BRANDON, FL 33511		7. Name and Address of New Registered Agent Name Becerra, Evelia Street Address (P.O. Box Number is Not Acceptable) 11826 Brenford Crest Dr. City Riverview FL Zip Code 33569	
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 E. Becerra DATE 4-6-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECERRA, EVELIA 626 HUNTINGTON STREET BRANDON, FL 33511	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Becerra, Evelia 11826 Brenford Crest Dr. Riverview, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. 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: E. Becerra		Date 4-6-04 Daytime Phone # (813) 672-2259	