FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNIJAI DEDORT Secretary of State FILED DIVISION OF CORPORATIONS 04 DEC -7 PM 4: 17 DOCUMENT # P03 000096595 SECRETARY OF STATE ALLAHASSEE, FLORIDA YEARWOOD & SON CONCRETE, INC. Mailing Address THE PROPERTY OF THE PROPERTY O 9919 GOLDEN LOOP! 3. Date Ingorporated or Qualified 3a. Date of Last Report NEW PORT RICHEY, FL 34654 2003' 2. Principal Place of Business Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intengible tax under s 199,032. 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CHESSLEY YEARWOOD Street Address (P.O. Box Number is Not Acceptable) 9919 GOLDEN LOUP 83 New Port Richer, FC 34654 City Zio Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable If a 11E: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE PRESTOGNT 1. 1 TITLE Change ☐ Addition GOLDEN LOOP NAME KESSC. PY 1.2 NAME STREET ADDRE 1.3 STREET ADDRESS CITY - ST- ZIP PURT RICHEY FL 1.4 CITY - ST - ZIP TITLE PRES / DIR 2. 1 TITLE ☐ Change Addition NAME JEFFREY YEARWOOD 2.2 NAME STREET ADDRESS 6199 RIMGE DR. 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP" 3.4 CITY-ST-ZIP DILE DELETE 4. 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5. 1 TITLE ☐ Change Addition NAME 5.2 NAME 200043237112 STREET ADDRESS **5.3 STREET ADORESS** 12/07/84---01035---011 **175.00 CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6. 1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cathernal 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 12 or Block 13 if changed, or on an attachment with an address.

October 28, 2004.

Fl Dept of State Div of Corporations Tallahassee, FL

Dear Sir/ Madam,

We never received any notice of renewal or an annual report of any type to fill out.

We have filled out an old blank form a friend gave us and hope that you will accept it as our 2004 annual report.

Sincerely,

Chessley Yearwood