

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90169 038 ***150.00

DOCUMENT # P03000128490

1. Entity Name

SUPER CONCRETE, INC.



Principal Place of Business
690 LAKE BUTLER AVE
OSTEEN FL 32764

Mailing Address
690 LAKE BUTLER AVE
OSTEEN FL 32764



2. Principal Place of Business

690 Lake Butler Ave
Suite, Apt. #, etc.

3. Mailing Address

690 Lake Butler Ave.
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Osteen FL

City & State

Osteen FL

4. FEI Number

06-1714140

Applied For

Not Applicable

Zip

32764

Country

USA

Zip

32764

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FILIPPELLO, ROBERT J
1518 GREGORY DRIVE
DELTONA FL 32738

7. Name and Address of New Registered Agent

Name Robert J. Filippello

Street Address (P.O. Box Number is Not Acceptable)

690 Lake Butler Ave.

City Osteen

FL

Zip Code

32764

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

Robert J. Filippello

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, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME FILIPPELLO, ROBERT J
STREET ADDRESS 1518 GREGORY DRIVE
CITY-ST-ZIP DELTONA FL 32738

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE president ☒ Change ☐ Addition
NAME Filippello, Robert J.
STREET ADDRESS 690 Lake Butler Ave
CITY-ST-ZIP Osteen, FL 32764

TITLE Secretary ☐ Change ☒ Addition
NAME Brooks Kelly
STREET ADDRESS 690 Lake Butler Ave.
CITY-ST-ZIP Osteen, FL 32764

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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:

Robert J. Filippello

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

386-804 2299

Daytime Phone #