

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000130987

1. Entity Name

B B BUBA B HUGHES CEMENT, INC.



FILED

05 JUL -5 PM 3: 04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

416 CLARK STREET  
OVIEDO, FL 32765

Mailing Address

416 CLARK STREET  
OVIEDO, FL 32765

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05242005

REIN-P

CR2E098 (6/04)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUGHES, BARBARA  
416 CLARK STREET  
OVIEDO, FL 32765

Name

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

City

FL

Zip Code

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 \$900.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
HUGHES, BARBARA  
416 CLARK STREET  
OVIEDO, FL 32765 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
000057477870  
07/14/05--01058--016 \*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
000057477870  
07/14/05--01058--017 \*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
000057477870  
07/14/05--01058--018 \*\*150.00 8.75

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
07/1/12

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Barbara Hughes

6/20/05 407365-2385

BB BuBA.B HUGHES.Cement, Inc.

416 Clark Street

OUiedo FLorida 32765

407-365-2385

Document # P03000130987

6/20/05

Division of Corporations

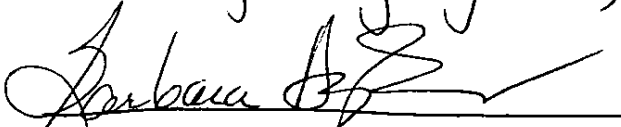
P.O. Box 6327

Tallahassee, Florida 32314

TO : ~~Whom~~ IT MAY CONCERN,

As per my conversation with your state Agent,  
Find Enclosed \$150.00 for 2004 and \$150.00 For  
2005 Registration Fee Along with my report. As per  
your Agents request please be advised that I do not  
have Internet Access AT This Time AND The \$ Six Hundred  
Dollars penalty should Be waived Because I have  
NOT received The Renewal POSTcard in the Mail

Very Truly yours,

  
Barbara Hughes - President.