## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000001694			FILED
1. Entity Name RONALD SMITH CUSTOM CONCRETE, INC.		, (2)	
			05 OCT + O Fil 12: 26
Principal Place of Business	Mailing Address		CECKETT ATE TALE
2918 AHERN DRIVE ORLANDO, FL 32817 US	2918 AHERN DRIVE ORLANDO, FL 32817	US	TAILS TO THE SECTION
0KB1100,7E 32077 03	OKEMBO, TE 32017	03	L (CENTES) (II GENT GIBIN BYIN BYIN BYIN BYIN BYIN BYIN 1791B BYIN 1811B 1811C BYBREY I 1992
Principal Place of Business	3. Mailing Address		
Octando PI	7918 AHER	n Dis	I (CONTR) IN OCIN GION BAIN BAIN BAIN BAIN BAIN BAIN BAIN BAI
Suite, Apt. #, etc.	Suite, Apt. #, etc.	- /	09292005 REIN-P CR2E098 (6/04)
City & State	City & State		4. FEI Number Applied For
Zip Country	Zip	Country	S61093298 Not Applicab  5 Certificate of Status Desired
	32817	Orange	Fee Required
6. Name and Address of Curn	ent Registered Agent	Name //	7. Name and Address of New Registered Agent
SMITH, RONALD.W		<u> </u>	nald W Smtps
2918 AHERN DRIVE ORLANDO, FL 32817		Street Addres	ss (P.O. Box Number is Not Acceptable)
,			
		City	FL Zip Code
The above named entity sibmits this statement the obligations of registered agent.	nt for the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent.	/		117-5-05
SIGNATURE Signature. What or printed rathe or redistered a	gent and title if applicable. (NOTI	E: Registered Agent signature re	
			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
	ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P NAME SMITH, RONALD W	☐ Delete	TITLE Q	en ned som, the Guston Change Addition
STREET ADDRESS 2918 AHERN DRIVE		STREET ADDRESS	Property of the second
CITY-ST-ZIP ORLANDO, FL 32817	При	CITY-\$T-ZIP	
NAME	☐ Delete	TITLE NAME	☐ Change ☐ Addition 10/10/0501075001 ★★300.00
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	700060456307
TITLE	□ Delete	CITY-ST-ZIP	19/19/95 91975 001 ** 00 00 Change   Addition
NAME	Li Delete	NAME	Change Notice
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Additio
NAME		NAME	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	WESTATEMENT_US_
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME Street address	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied indicated on this report or supplemental report	with this filing does not qualify for ort is true and accurate and that n	the exemption stated in ny signature shall have t	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director
of the corporation or the receiver or trustee e changed, or on an attachment with a addre	mpowered to execute this report ss, with all other like empowered.	as required by Chapter	he same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 i
	XI		10-5-05 407 383-0860
SIGNATURE: SIGNATURE AND TYPED	OF PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Date Daylime Phone #

(850) 245-6059.

Tyrone Scott Document Specialist

Letter Number: 705A00059417

Home & Garages. I was told to wright to Ask For help.

Also Send A Chack For Three hundred Dollars.

Thank you Ronne Smith 407 383-0860