2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Aug 11, 2005 8:00 am Secretary of State **DOCUMENT # P04000007554** 08-11-2005 90004 020 ***158.75 1. Entity Name CHESS CONCRETE CORING, INC Principal Place of Business Mailing Address 50061080 23270 CEDAR HOLLOW WAY 23270 CEDAR HOLLOW WAY BOCA RATON, FL 33433 BOCA RATON, FL 33433 2. Principal Place of Business 3. Mailing Address KOGERS CIECLE 6401 E. ROGERS CIECLE Suite, Apt. #, etc. 07212005 CR2E034 (10/03) Chg-P Suite # 18 Suit∈ City & State City & State 4. FEI Number Applied For *20-05783*1 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name heistophee MCGONIGLE, JACQUELINE **6221 BANYAN TERR** Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33317 CEDAR HOllow WAY 8. The above named entity submits this statement for the purpose of cha registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. aristooner lled name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE D ☐ Delete TOLE ☐ Change ■ Addition HESS, CHRISTOPHER NAME NAME STREET ADDRESS 23270 CEDAR HOLLOW WAY STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-782 TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CITY-SI-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

FILED