2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000101957 1. Entity Name 02-02-2005 90057 045 ***150.00 DBC CONCRETE INC. Principal Place of Business Mailing Address 2128 W HIBISCUS RD 2128 W HIBISCUS RD 50009556 AVON PARK, FL 33825 AVON PARK, FL 33825 2. Principal Place of Business 1739 Pinedale Tem 3. Mailing Address 1739 Pinedale Terr 01102005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-1347485 Placid Placed ake - Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent COLLEY FINANCIAL SVCS., INC. Street Address (P.O. Box Number is Not Acceptable) 209 US 27 S LAKE PLACID, FL 33852 City 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Baker, Donald T 1739 Pinedale Terr Lake Placid, FL 33852 Addition TOLE Change Delete TITLE BAKER, DONALD J NAME NAME 2128 W HIBISCUS RD STREET ADDRESS STREET ADDRESS City-St-789 AVON PARK, FL 33825 CITY-ST-ZIP Baker, Blake D TITLE ☐ Delete TITLE Addition 1739 Pinedale Terr BAKER, BLAKE D NAME NAME Lake Placid, FL 33852 Baker, Brett C Duchan STREET ADDRESS 2128 W HIBISCUS RD STREET ADDRESS AVON PARK, FL 33825 CITY-ST-ZIP CITY- ST-212 ☐ Addition TITLE ☐ Delete TITLE 1739 Pinedale Terr NAME BAKER, BRETT C STREET ADDRESS 2128 W HIBISCUS RD STREET ADDRESS Lake Placid, FL 33852 CITY-ST-7IP AVON PARK, FL 33825 CITY-ST-ZIP Change Addition: TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete IIILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 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

Feb 02, 2005 8:00 am