2005 FOR PROFIT CORPORATION (ALL)

FILED
Mar 14, 2005 8:00 am
Secretary of State

OCUI		# P040001355	05				•	02-04-20		-		
•	CONCRET	E INC						02 012		, 0 10 0		30.00
rincipal Place of Business 2374BARCELONA AVE CRTMYERS FL 33905 JS			Mailing Address 2374BARCELONA AVE FORTMYERS FL 33905 US			/ / / / / / / / / / / / / / / / / / /						
Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1	st MOORE	CR	2E034 (10/04)		
City & State		City & State				4. FEI Num	-02005	7 7	······································		plied For	
Zip	Zip Country		Zip	Zip Coun				te of Status Desire			B.75 Add	litional
	6. Name	and Address of Current	Registered Agent	<u> </u>	T		7. Name an	d Address of Ne	w Regis	tered Ag	ent	
					Name -		-					
BARKER, COHEN T 2374BARCELONA AVE				Street A	ddress (F	P.O. Box Num	ber is Not Accept	able)			,	
- ·	HIMYERS	-F.L.33905		= :				<i></i>	:		-	
			•		City					FL	Zip Cod	
the above	named entit tions of regist	y submits this statement for sered agent.	or the purpose of changing its	register	ed office or	register	ed agent, or b	oth, in the State o	f Florida	, tarn far	niliar with,	and accept
SIGNATURE .	Sporture Mond	Or printed name of registered agent	and tile a popheable (MO)	E- Remsuse	ed Agent signer	re reciired	when reinstating)			DATE		
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2. 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:

STATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Dayuma Phone #