

APR-28-2006 02:14 PM

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 FOR PROFIT CORPORATION

DOCUMENT # P05000108276			
1. Entity Name P&L CONCRETE PUMPING INC.			
Principal Place of Business 7559 NATURE TRAIL HERNANDO, FL 34442		Mailing Address 7559 NATURE TRAIL HERNANDO, FL 34442	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. EEI Number 270128105		5. Certificate of Status Desired ☐ \$8.75 Add-on Fee Required	
6. Name and Address of Current Registered Agent LONG, PAUL 7559 N NATURE TRAIL HERNANDO, FL 34442		7. Name and Address of New Registered Agent 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 _____ DATE _____ (Signature of agent or officer of the corporation or its authorized agent. (NOTE: Registered agent signs and provides when registering.)			
FILE NOW! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D LONG, PAUL 7559 N NATURE TRAIL HERNANDO, FL 34442 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D SOTA, LARRY 7559 N NATURE TRAIL HERNANDO, FL 34442 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 exemptions contained in Chapter 119, 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, changed, or on an attachment with an address, with a change of name.			
SIGNATURE: _____ LARRY SOTA		Date: 1-28-06 352-344 8916	

K. Eckel OCT 27 2006

10-20-06

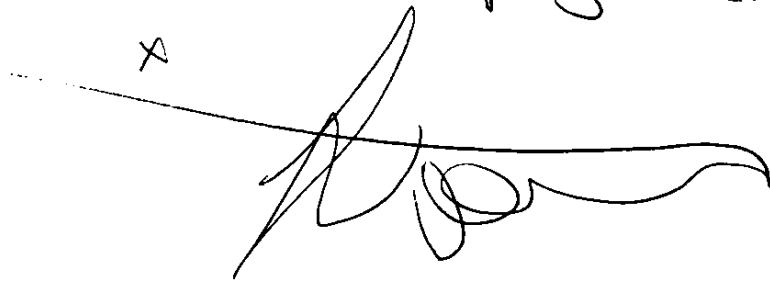
2/2

TO Whom it may CONCERN

I SENT the form + payment
ON MAY 2006 AND ~~NEVER~~ NEVER HEARD
Anything UNTIL ~~to DA~~ today - REINSTATEMENT
Form. I Already paid the \$150.00 FEE
AND the check WAS CASHED. IN MAY 2006,
I'd like to WAIVE LATE FEES.

Thank you
LARRY SOWA
P & L Pumping Inc.

X

A handwritten signature in black ink, appearing to read 'Larry Sowa', with a long horizontal line extending to the right.