

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 APR 30 PM 1:06



04092008 REIN-P CR2E098 (1/07)

**DOCUMENT # P05000159584**  
1. Entity Name  
**ROOSEVELT WOODBERRY QUALITY DISCOUNT  
CONCRETE INC.**

Principal Place of Business      Mailing Address  
**255 W. LUCAS ROAD**      **255 W. LUCAS ROAD**  
**MERRITT ISLAND, FL 32953**      **MERRITT ISLAND, FL 32953**

2. Principal Place of Business - No P.O. Box #      3. Mailing Address  
**1213 Ronald St**      **ROOSEVELT WOODBERRY**  
Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**1213 Ronald St**

City & State      City & State  
**Titusville FL**      **Titusville**  
Zip      Zip  
**32780**      **FL**      **BREVARD**      **BREVARD**

4. FEI Number      Applied For  
**41219-0277**      Not Applicable  
5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**WOODBERRY, ROOSEVELT**  
**255 W. LUCAS ROAD**  
**MERRITT ISLAND, FL 32953**

7. Name and Address of New Registered Agent  
Name **ROOSEVELT WOODBERRY**  
Street Address (P.O. Box Number is Not Acceptable)  
**1213 RONALD ST**  
City **Titusville**      **FL**      Zip Code **32780**

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 **Roosevelt E. Woodberry**      DATE **4-24-08**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>WOODBERRY, ROOSEVELT</b> <b>255 W. LUCAS ROAD</b> <b>MERRITT ISLAND, FL 32953</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>ROOSEVELT E. WOODBERRY</b> <b>1213 RONALD ST.</b> <b>TITUSVILLE FL 32780</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>500126961705</b> <b>04/30/08--01003--019 **300.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>AS 5/1/08</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>REINSTATEMENT 07-08</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Roosevelt Woodberry**      DATE: **4-24-08**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #