FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
96 MAY 30 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06018 (6)

1. Corporation Name

~~BORAL CONCRETE PRODUCTS, INC.~~ N/C 5-30-96

BORAL LIFETILE INC.

Principal Place of Business	Mailing Address
BORAL CONCRETE PROD INC 800 N. HAVEN AVE. STE 240 ONTARIO CA 91764 US	BORAL CONCRETE PRO INC 800 N. HAVEN AVE. STE 240 ONTARIO CA 91764 US

2. Principal Place of Business	2a. Mailing Address
21 4400 MACARTHUR BLVD.	26 2859 PACES FERRY RD.
Suite, Apt. #, etc. 22 500	Suite, Apt #, etc 27 1520
City & State 23 NEWPORT BEACH, CA. 92660	City & State 28 ATLANTA, GA. 30339
Zip 24 — Country 25 USA	Zip 29 — Country 30 USA

3. Date Incorporated or Qualified: 05/14/1985
3a. Date of Last Report: 05/01/1995
4. FEI Number: 94-2174208 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

800001845198
-05/30/96--01055--005
*****25.00 *****25.00

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ________ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: C; NAME: TUFF, TIMOTHY C; STREET ADDRESS: 2859 PACES FERRY RD, STE 1520; CITY-ST-ZIP: ATLANTA GA	☐ DELETE	1 ☐ Change ☐ Addition
TITLE: V; NAME: DEARMAN, ELVIS; STREET ADDRESS: 30595 FM 529; CITY-ST-ZIP: KATY TX	☐ DELETE	2 ☐ Change ☐ Addition 800001845198 -05/30/96--01055--004 ****200.00 ****200.00
TITLE: P; NAME: TUFF, TIMOTHY C.; STREET ADDRESS: 2859 PACES FERRY ROAD, SUITE 1520; CITY-ST-ZIP: ATLANTA GA	☒ DELETE	3 ☒ Change ☐ Addition PRESIDENT HINSHAW, DONALD 4400 MAC ARTHUR BLVD, #500 NEW PORT BEACH, CA. 92660
TITLE: V; NAME: HEYDENREICH, G.; STREET ADDRESS: 1724 S. ROOFTILE ROAD; CITY-ST-ZIP: CASA GRANDE AZ	☐ DELETE	4 ☐ Change ☐ Addition
TITLE: V; NAME: ZANELLA, G.; STREET ADDRESS: 800 N. HAVEN AVE, STE 240; CITY-ST-ZIP: ONTARIO CA	☒ DELETE	5 ☒ Change ☐ Addition VICE PRESIDENT JONES, STEVEN 2859 PACES FERRY RD. # 1520 ATLANTA, GA. 30339
TITLE: S; NAME: MCLEAN, ERNEST; STREET ADDRESS: 2859 PACES FERRY ROAD, SUITE 1520; CITY-ST-ZIP: ATLANTA GA	☐ DELETE	6 ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: ________ 5/1/96 (770) 801-8700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
STEVEN JONES - VICE PRESIDENT

CR2E034 (12/95)