

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038144

Entity Name: KON-CRETE KREATIONZ, INC

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

8720 HARPERS GLEN CT
JACKSONVILLE, FL 32256

New Principal Place of Business:

8701 PHILLIPS HWY
102
JACKSONVILLE, FL 32256

Current Mailing Address:

8720 HARPERS GLEN CT
JACKSONVILLE, FL 32256

New Mailing Address:

P.O. BOX 600571
JACKSONVILLE, FL 32260

FEI Number: 20-8722734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAEDER, JANICE F
8720 HARPERS GLEN CT
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

MAEDER, TIMOTHY M
8701 PHILLIPS HWY
102
JACKSONVILLE, FL 32256 US

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.

SIGNATURE: TIMOTHY M MAEDER

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAEDER, JAINCE F
Address: 8720 HARPERS GLEN CT
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Delete
Name: MAEDER, TIMOTHY M
Address: 8720 HARPERS GLEN CT
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAEDER, JAINCE F
Address: 8701 PHILLIPS HWY STE 102
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: MAEDER, TIMOTHY M
Address: 8701 PHILLIPS HWY STE 102
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY M MAEDER

VP

01/15/2008

Electronic Signature of Signing Officer or Director

Date