

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079825

FILED
Aug 13, 2008
Secretary of State

Entity Name: BADA BING CONCRETE PUMPING, INC.

Current Principal Place of Business:

1707 MYRTLE STREET
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

PO BOX 22458
LAKE BUENA VISTA, FL 32830 US

New Mailing Address:

FEI Number: 26-0549922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, JIMMY JR.
1707 MYRTLE STREET
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMOS, JIMMY JR.
Address: 1707 MYRTLE STREET
City-St-Zip: ORLANDO, FL 32807 US

Title: VP () Delete
Name: LE BELLOT, AURIA
Address: PO BOX 22458
City-St-Zip: LAKE BUENA VISTA, FL 32830 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AURIA E. LEBELLOT

VP

08/13/2008

Electronic Signature of Signing Officer or Director

Date