

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33247

Entity Name: CEMEX, INC.

FILED
Mar 29, 2011
Secretary of State

Current Principal Place of Business:

920 MEMORIAL CITY WAY, STE 100
HOUSTON, TX 77024 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1500
HOUSTON, TX 772511500 US

New Mailing Address:

FEI Number: 72-0296500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: P
Name: PEREZ, GILBERTO
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

Title: D
Name: WHITE, LESLIE S
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

Title: T
Name: BENAVIDES, ALEJANDRO
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

Title: D
Name: ANGELLE, FRANK E
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

Title: S
Name: VILLARREAL, RAMIRO
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

Title: D
Name: PEREZ, GILBERTO
Address: 920 MEMORIAL CITY WAY, STE 100
City-St-Zip: HOUSTON, TX 77024 US

I hereby 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 all other like empowered.

SIGNATURE: LESLIE S. WHITE

D

03/29/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date