

**WARNING: FILING FEE AFTER MAY 1 IS :**

**FILED**  
**May 28 1998 8:00am**  
**Secretary of State**

**CORPORATION**  
**ANNUAL REPORT**  
**1998**



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

**DOCUMENT # P93000006465 (7)**  
 Corporation Name  
**FRANKY PUMPING CONCRETE, CORP.**

Principal Place of Business      Mailing Address  
**1048 SW 29 AVE**                      **1048 SW 29 AVE**  
**MIAMI FL 33135**                      **MIAMI FL 33135**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>01/27/1993</b>		3a. Date of Last Report <b>08/05/1994</b>	
4. FEI Number <b>65-0383330</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business				2a. Mailing Address				4. FEI Number				Applied For			
1				26				65-0383330				Not Applicable			
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
2				27				6. Election Campaign Financing Trust Fund Contribution				<input type="checkbox"/> \$5.00 May Be Added to Fees			
City & State				City & State				6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes				<input type="checkbox"/> Yes <input type="checkbox"/> No			
3				28											
Zip		Country		Zip		Country									
25				29		30									

9. Name and Address of Current Registered Agent  
**TORRES, FRANCISCO J**  
**1048 SW 29 AVE**  
**MIAMI FL 33135**

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

SIGNATURE: *[Signature]*  
 APRIL 30, 98

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 understand the Florida Statutes.

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D TORRES, FRANCISCO J			1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TORRES, FRANCISCO J			1.2 NAME			
STREET ADDRESS	1048 SW 29 AVE			1.3 STREET ADDRESS			
CITY, ST, ZIP	MIAMI FL 33135			1.4 CITY-ST-ZIP			
TITLE				2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE				3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE				4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE				5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE				6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME	200002540472		
STREET ADDRESS				6.3 STREET ADDRESS	-05/29/98--01015--045		
CITY-ST-ZIP				6.4 CITY-ST-ZIP	***158.75		

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 o

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