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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P93000020070

CAC AGGREGATES, INC.

FILED Feb 06, 1999 8:00am **Secretary of State**

02-06-1999 90022 050 ***158.75



Business
3. Date Incorporated or Qualified (03/16/1993 4. FEI Number 65-0394797 Suite, Apt. #, etc. 5. Certificate of Status Desired 27 City & State 28 Country 27 Country 28 Country 29 30 Country 30 Earne and Address of Current Registered Agent Agen
Business 2a Mailing Address A
Suite Applicable Application Applica
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Z
Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite, Apt. #, etc. 27 City & State Country Zip Added to Fees Required Trust Fund Contribution R. This corporation owes the current year Intangible Personal Property Tax. Yes No Personal Property Tax. Yes No Name and Address of New Registered Agent Raid ACITY FL 85 Zip Code* No Raid
Country Zip Country 8. State 7. Country 8. This corporation owes the current year intangible Personal Property Tax.
Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No Islame and Address of Current Registered Agent 9. Name 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Age
Country Zip Country B. This corporation owes the current year Intangible Personal Property Tax. Yes No
29 30 Personal Property Tax. Yes No. Alame and Address of Current Registered Agent
AIG O CLUB ROAD ON FL 33414 B3 City FL B5 Cip Code Agent and Address of New Registered Agent B1 Name AIG O CLUB ROAD ON FL 33414 B3 City FL B5 Cip Code Agent and Expressions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating); OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS IN 12 AUB, GLENN F 99 POLO CLUB ROAD LINGTON FL 33414 DELETE 21 TITLE Change Addition Change Chan
AIG O CLUB ROAD ON FL 33414 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code Provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered deagent, 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 liar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating): OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 NAME 12 NAME 13 STREET ADDRESS 14 City FL 85 Zip Code ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addit Addit City-ST-Zip LINGTON FL 33414 DELETE 21 TITLE Change Addit
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14. I hereby certify that the information supplied with this filing does not qua indicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustee emproyere Block 12 or Block 13 if changed, or on an attagament with an address. rippion stated in Section (19.07(3)(1), Florida Statutes. I futurer certify that the months to that my signature shall have the same legal effect as if made under oath; that I am an its perfect as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE