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Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90149 028 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address 742 W 50 PL

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000037352

1. Corporation Name

Principal Place of Business

742 W 50 PL

BACALLAO CONCRETE PUMPING CORP.

		X₹3	104K			•		
#X9# X HIALEAH FL 33	3012		UALEAH FL 33012			: DO NOT WRITE	IN THIS SPACE	
US		US	3		,	3. Date Incorporated or Qualifed 05/24/1993		
2. Principal P	Place of Business	2a.	, Mailing Address			4. FEI Number	Ap	plied For
21		26	·			65-0413952	<del></del>	t Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				\$8.75	Additional
22	.,	27	•			5. Certificate of Status Desired	Fee Re	equired
City & Stat	te		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	·			Trust Fund Contribution	Added t	•
Zip	Country		Zip	Country	;	8. This corporation owes the current	nt year Intangible	
24	25	29	[	30		Personal Property Tax.	Ýes	No
<del></del> -	9. Name and Address of C			, [		10. Name and Address of New Re	gistered Agent	1
				81	Name			
BACALLAO, FRANCISCO				82	Chun at Add	dana (D.O. Boy Number in Net Acceptable		<del></del>
742 W 50 PL				02	Street Auc	dress (P.O. Box Number is Not Acceptable	l <del>e</del> )	
<b>₩10</b>				83				
HIÂL	EAH FL 33012							
ļ				84	City		FL  85   Zip (	Code
44 Durayant	to the provinces of Sections 60	37 0502 and 6	807 1508 Florida Statute	s the abov	e-named cor	poration submits this statement for the pu	urpose of changing its	registered
office or o	edictored agent or both in the	State of Florin	da. Such change was au	thorized by	the comoral	tion's board of directors. I hereby accept	the appointment as re	gistered
agent. I a	m familiar with, and accept the	obligations of	, Section 607.0505, Flori	da Statutes	3.			
SIGNATURE	Signature, typed or printed name of registe		if analisable (NOTE: I	Pagistared Age	nt eigneture regul	red when reinstating)	DATE	
12.		RS AND DIRE	<del></del>	13.	nt aignature requi	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	P	to filto birte	☐ DELETE	1.1 TITLE			Change	Addition
IIICE	'			********	I .			
NAME .	BACALLAO FRANCISCO			12 NAME	1			
NAME	BACALLAO, FRANCISCO			1.2 NAME	TADDDESS			/ +
STREET ADDRESS	742 W 50 PL			1.3 STREE	T ADDRESS	•		. *
STREET ADORESS CITY-ST-ZIP	742 W 50 PL HIALEAH FL 33012		□ 0ELETE	1.3 STREE	- 1		<u> </u>	Addition
STREET ADDRESS CITY-ST-ZIP TITLE	742 W 50 PL HIALEAH FL 33012	ID.	☐ DELETE	1.3 STREE 1.4 CITY-S 2.1 TITLE	- 1		∵ . ☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	742 W 50 PL HIALEAH FL 33012 V BACALLAO, FRANCISCO	JR.	☐ DELETE	1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	T-ZIP		<u> </u>	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	742 W 50 PL HIALEAH FL 33012 V BACALLAO, FRANCISCO 742 W 50 PL	JR.	□ OELETE	1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	T-ZIP		<u> </u>	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	742 W 50 PL HIALEAH FL 33012 V BACALLAO, FRANCISCO 742 W 50 PL HIALEAH FL 33012	JR.		1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	T-ZIP		☐ Change	<u>-</u>
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	742 W 50 PL HIALEAH FL 33012 V BACALLAO, FRANCISCO 742 W 50 PL HIALEAH FL 33012 ST	JR.	□ OELETE	1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE	T-ZIP		<u> </u>	Addition  Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	742 W 50 PL HIALEAH FL 33012 V BACALLAO, FRANCISCO 742 W 50 PL HIALEAH FL 33012 ST BACALLAO, LUIS A	JR.		1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS ST-ZIP -		☐ Change	<u>-</u>
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or Block 13 if chapter or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Daytime Phone #