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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 29 1997 8:00am

Secretary of State

DOCUMENT # P93000056768 (3)

B & B CONCRETE PUMPING INC.

Principal Place of Business Mailing Address								
8701 NW 124TH AVE CORAL SPRINGS FL 33065 US	3701 NW 124TH AVE CORAL SPRINGS FL 33065-2447 US							
					3. Date Incorporated or Qualified 08/12/1993		e of Last Re 5/1996	Prode
2. Principal Place of Business	ipal Place of Business 28. Mailing Address				4. FEI Number		Ap	plied For
1 26					65-0429233		No	t Applicable
Suite, Apt. #, etc.	1				5. Certificate of Status Desired		\$8.75	
22 City & State	ity & State 27 City & State						Fee Re	· <u>'</u>
., '	28				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip Country	7 _{IP}	Country			8. This corporation has liability for i			
24 25	29 30				Florida Statutes Yes No			
9. Name and Address of Current R	egistered Agent		I,		10. Name and Address of New Re	stered A	gent	
BERGE, L KYLE	•		81	Name				
4800 NE 11TH AVE			82	Street Add	fress (P.O. Box Number is Not Acceptab	le)		
OAKLAND PARK FL 33334			83					
			83					
•			84	City			85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 at	nd 607 1508 Horida Stati	utes the al	hove	e-pamed cor	poration submits this statement for the p	FL.	changung iti	s registered
office or registered agent, or both, in the State of l agent. I am familiar with, and accept the obligation	Horida. Such change was	s authorize	d by	the corpora	ation's board of directors. Thereby accep	t the appo	intment as	registered
•	1, 2000, (00 1:0),000,10 81	ronda Siai	ules	>.				
SIGNATURE Signature, typed or punited name of registered agent ar	d to if applicable (NO	OTE Begisteres	d Age	nt signature requ	ired when reinstaing)	DATE		
12. OFFICERS AND D		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12
TIRE P	☐ DELETE	1 1 TI	TLF				Change	Addition
NAME BERGE, L KYLE STREET ADDRESS 4800 NE 11TH AVE		12 N/	AME					
DAVIAND DADY PI		13 STREET						
CITY-ST-ZIP UANLAND PARK FL	DELETE		14 CITY-ST-7IP			······································	Change	Addition
NAME			2 1 TIFLE 2 2 NAME			L	Griange	□ Addition
STREET ADDRESS		1		ADDRESS				
CITY-ST-ZIP				ST - ZIP				
TITLE	DELETE 311			2. E11			Change	Addition
NAME	321		AME				-	
STREET ADDRESS		3 3 51	TREET	ADDRESS				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	3 4. C	HY-9	ST - 7IP		· · · · · · · · · · · · · · · · · · ·		
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NAME		4. 2 N						ľ
STREET ADDRESS				AODRESS				
CITY-ST-ZIP		4.4 CI		T-ZiP				
NAME	DELETE						Chanas	Addition
STREET ADDRESS	DELETE	5111	TLE			- 1	Change	Addition
	DELETE	5.1 TI 5.2 N/	TLE AME				Change	Addition
	☐ DELETE	5.1 TI 5.2 N/ 5.3 SI	TLE AME IREE 1	ADDRESS			Change	Addition
CITY-ST-ZIP		5 1 TI 5.2 N/ 5.3 SI 5.4 CI	TLE AME THEET TY-S	ADDRESS		,		
	☐ DELETE	5.1 TI 5.2 N/ 5.3 SI	TLE AME THEET TY-S	ADDRESS		,	Change Change	Addition Addition

14. I do 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 eport of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the composition or the reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or file ker of changes, or on purallachment with an address.