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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000078170 (6) MATYAS CONCRETE, INC.

STREET ADDRESS CITY-ST-ZIP

Principal Place of Business Mailing Address										<b>101</b> 11 100 <b>1</b> 1 9		
2102 NE 3 TERR				2102 NE 3 TERR								
CAPE CORAL FL 33909				CAPE CORAL FL 33909-2850								
U\$			US	\$					- <u>-</u>			
									Date incorporated or Qualified 11/08/1993		ite of Last F <b> 2/1996</b>	Report
2. Principal Place of Business				2a. Mailing Address				4	. FEI Number	-	A	pplied For
21				26					<b>65-0438035</b> Not Applicable			
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5	. Certificate of Status Desired			Additional
22 City P. State				City & State					E. C. A E			equired
City & State				28			Б	Election Campaign Financing     Trust Fund Contribution		\$5.00	May Be to Fees	
Zip Country				Zip Count				R	This corporation has liability for in		•	
24			29	¬ ' —				Florida Statutes  Yes  No			s. 180.002,	
	9, Name	and Address of Cu					10	10. Name and Address of New Registered Agent				
MATYAS, NORMA J							Name					
2102 NE 3 TERR				82			Street A	ddress (i	P.O. Box Number is Not Acceptab	le)		
CAPE CORAL FL 33990												
						83						
						84	City				85 Zip	Code
				205 1720 ET 1 <del>201</del>		Ļ				FL		
office or r	egistered ag	ent, or both, in the S	State of Flor	ida. Such change was	author	rized by	the corpo	corporation's	on submits this statement for the p board of directors. I hereby accep	urpose of It the app	changing i ointment as	its registered s registered
agent. I a	ım <b>fam</b> iliar wi	ith, and accept the o	obligations o	of, Section 607.0505, F	lorida :	Statutes						-
SIGNATURE	Slooglyn typed	or printed name of register	od amont and tal	le diamographic (NC	M. Hook	skured Age	nt eignature r	sequired who	ar reinstaling)	DATE		
12.	digitalists, typed		S AND DIRE			13.	in aignatore i		ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	PD			☐ DELE1E	1	1.1 TITLE					Change	Addition
NAME	MATYAS, JOHN R			1.2 N				•				
STREET ADDRESS 2102 NE 3					٠ ا	3 STREET	ADDRESS					
CITY-ST-ZIP	CAPE CO	RAL FL			1	L4 CITY-S	1-7IP		e estados a menos estados a serial alcuma, en acronomos para abora en acomposição a encada entada en	·		
TITLE	SID	NODIAL I		☐ DELETE		21 TITLE					☐ Change	Addition
NAME	MATYAS, NORMA J			22 N								
STREET ADDRESS	CARE CODAL EL						ADDRESS					
CITY-ST-ZIP	UNITE OU	VIVAL FL		DELETE		2 4 GITY- S 3:1 TITLE	1 - 7/P				Change	Addition
l '											La change	L'1 Modition
NAME STREET ADDRESS					1	3.2 NAME 3.3 STREET	AUUDEGG					
CITY-ST-ZIP						3.4. CITY-S						
TITLE	<del> </del>			DELETE		a.a. uniy-s 4.1 Title	11 - £(F		THE PERSON OF TH		Change	Addition
NAME						4. 2 NAME						
STREET ADDRESS						4.3 STREFT	ADDRESS					
CITY-ST-ZIP						4.4 CITY-S	}					
TITLE		<del> </del>		DELETE		5.1 TITLE					Change	Addition
NAME	]				:	5.2 NAME		,	٠,			
STREET ADDRESS						53 STREET	ADDRESS					
CITY-ST-ZIP						5.4 CITY - S	1-7IP			· - · • · · · · · · · · · · · · · · · ·		
TITLE				DELFTE	(	6.1 TITLE					Change	Addition

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 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

or on an attachment with an address.