

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 19 1997 8:00am  
Secretary of State

DOCUMENT # P93000082309 (4)

1. Corporation Name

PRECAST STRUCTURES INT'L, INC.



Principal Place of Business  
2701 E. SUNRISE BLVD.  
SUITE 109  
FORT LAUDERDALE FL 33304

Mailing Address  
2701 E. SUNRISE BLVD.  
SUITE 109  
FORT LAUDERDALE FL 33304-3201

3. Date Incorporated or Qualified  
11/22/1993

3a. Date of Last Report  
04/30/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

4. FEI Number

65-0461924

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BISHOP, ROBERT J  
2119 N.E. 11 AVENUE  
WILTON MANORS, FL 33305

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

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME SHAW, M. JAMES  
STREET ADDRESS 2151 N.E. 51 COURT  
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE DVTS ☐ DELETE

NAME BISHOP, ROBERT J  
STREET ADDRESS 2119 N.E. 11 AVENUE  
CITY-ST-ZIP WILTON MANORS FL 33305

TITLE DV ☐ DELETE

NAME ELLIS, WILLIAM S  
STREET ADDRESS 3050 N.E. 47 COURT  
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE D ☐ DELETE

NAME BLAKSLEY, HAROLD E.  
STREET ADDRESS 2758 N.E. 35TH STREET  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DV ☐ Change ☒ Addition

1.2 NAME E.I. BOBBITT  
1.3 STREET ADDRESS 3117 S. Casper Place  
1.4 CITY-ST-ZIP TITUSVILLE, FL 32780

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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 changed, or on an attachment with an address.

SIGNATURE ROBERT J. BISHOP

CR2E034 (9/96)