## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P93000088849

1. Entity Name

CONCRETE DESIGNS OF FLORIDA, INC.



FILED Apr 11, 2007 08:00 AM Secretary of State

Principal Place of Business

578 VERACRUZ BLVD INDIALANTIC, FL 32903 Mailing Address

578 VERACRUZ BLVD Indialantic, FL 32903

US



## DO NOT WRITE IN THIS SPACE

04022007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3226175

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STANLEY, FREDERIC J 1361 BEDFORD DR SUTIE 101 SUITE 106 MELBOURNE, FL 32940

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the p tions of registered agent.	urpose of changing its registere	d office or	registered agent, or bot	th, in the State of Florida. I am familiar with, and ac	ccept
SIGNATURE	. Signature, typed or printed name of registered agent and title if	englicable (NOTE: Beginner	A sect signatur	e required when reinstating)	DATE	_
Fil. After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	•	\$5.00 May Be Added to Fees	·	
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST EAST, JAMES M 578 VERACRUZ BLVD INDIALANTIC, FL 32903				U00000700248 04/20/07-80010-009 150	00.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EAST, KAREN S 578 VERACRUZ BLVD INDIALANTIC, FL 32903		•			
TITLE NAME Street Address City-St-Zip				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME		· · · · · · · · · · · · · · · · · · ·				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attactiment with an address, with all other like empowered.

**SIGNATURE:** 

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/6/07 321-255-3535