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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

P94000013843 (5) DOCUMENT # MIDWEST CONCRETE, INC. Principal Place of Business Mailing Address 1371 17TH STREET S.W. 1371 17TH STREET S.W. NAPLES FL 33964 NAPLES FL 33964 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1994 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 **.65-047.1666** Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BLUMMER, GEORGE 1371 17TH STREET S.W. 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33964 83 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 (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ... Change Addition TITLE 1.1 TITLE **BLUMMER, GEORGE F. III** NAME 1.2 NAME 1371 17TH ST. S.W. STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 1.4 CITY-ST-7IP CITY-ST-7IP TITLE DELETE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CHTY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CHTY - ST - ZIP DELETE Channe Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CHTY-ST-ZIP 6.4 CITY - ST- ZIP

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 changed, or on the attachment with an order section.

SIGNATURE:

GADAROR (UMAROTTE

98 499-2049

FILED

Oct 07 1998 8:00am

Secretary of State