FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000019424 (8)

1. Corporation Name
HUFFINE AGGREGATE UNLOADING, INC.

Principal Place of Business	Mailing Address
520 56 STREET HOLMES BEACH FL 34217	520 56 STREET HOLMES BEACH FL 34217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/08/1994
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 65-0544580 ☐ 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 F.S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HUFFINE, TERRY E
520 56 STREET
HOLMES BEACH FL 34217

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: (Required if this is a change)

12. OFFICER/DIRECTOR	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '95
01 D 02 HUFFINE, TERRY E 03 520 56 STREET 04 HOLMES BEACH FL 34217	01 ☐ Change ☐ Addition 02 NAME 03 STREET ADDRESS 04 CITY-ST-ZIP
05 ☐ Change ☐ Addition 06 NAME 07 STREET ADDRESS 08 CITY-ST-ZIP	09 ☐ Change ☐ Addition 10 NAME 11 STREET ADDRESS 12 CITY-ST-ZIP
13 ☐ Change ☐ Addition 14 NAME 15 STREET ADDRESS 16 CITY-ST-ZIP	17 ☐ Change ☐ Addition 18 NAME 19 STREET ADDRESS 20 CITY-ST-ZIP
21 ☐ Change ☐ Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	25 ☐ Change ☐ Addition 26 NAME 27 STREET ADDRESS 28 CITY-ST-ZIP
29 ☐ Change ☐ Addition 30 NAME 31 STREET ADDRESS 32 CITY-ST-ZIP	33 ☐ Change ☐ Addition 34 NAME 35 STREET ADDRESS 36 CITY-ST-ZIP

14. To the best of my knowledge, the information supplied with this report is voluntarily furnished and 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 added to the report or is otherwise entered on a separate attachment with an address.

SIGNATURE: Terry E. Huffine TERRY E. HUFFINE 4/29/95 813-778-7967
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0347760 CP