2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P94000024232 1. Entity Name ADVANCED CONCRETE PRODUCTS, INC.				FILED Jan 25, 2001 8:00 am Secretary of State 01-25-2001 90001 016 ***150.00
Principal Place of Business 120 49TH ST. OCEAN MARATHON FL 33050		Mailing Address 120 49TH ST. OCEAN MARATHON FL 33050		702735
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE.
City & State		City & State		4. FEI Number 65-0477271 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired Status Desired Status Desired Fee Required
830 MAR	SCH, HARRY 50TH COURT ATHON FL 33050 named entity submits this statement for Signature, typed or printed name of registered agen	ROBERT J. BR		BERT V. Beumley (C. Box Number is Not Acceptable) S BIJE HID DEIJE (ATHO) FL Zip Code 33050 Itered agent, or both, in the State of Florida. June HID DATE
Tax filing r	ration is eligible to satisfy its Intangible equirement and elects to do so. (a on back)	After MAY 1, 20 Make Check Payat	!!! FEE IS \$150.00           101 Fee will be \$550.00           ble to Department of S           12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
ITLE IAME STREET ADDRESS CITY-ST-ZIP	P PEITSCH, HARRY 830 50TH COURT, GULF MARATHON FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BERT V. BEUMLEY BERT V. BEUMLEY BESS BLUEFIN DRIJE MARATHOD FL 32050
ITLE IAME TREET ADDRESS ITY-ST-ZIP	VP PEITSCH, HELENE 830 50TH COURT MARATHON FL 33050	🗌 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
ITLE AME TREET ADDRESS ITY~ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
tle Ame Treet address Ity-st-zip		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change 🔲 Addition
ITLE Ame Treet address ITY-ST-Zip		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	C] Change 🗌 Addition
ITLE AME TREET ADDRESS ITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
<ul> <li>I hereby c indicated of the corr changed,</li> <li>SIGNAT</li> </ul>	on this report or supplemental report i poration or the receiver or frustee emp or on an attachment with an address/	h this filing does not qualify fo is true and accurate and that r wered to execute this report with flother like empowered	ny signature shall have th as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information le same legal effect as if made under oath: that I am an officer or director S07, Florida Statutes; and that my name appears in Block 11 or Block 12 if TSCH /-//-OI 30\$7434232