

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.  
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$675)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



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

**FILED SECRETARY OF STATE DIVISION OF CORPORATIONS**

95 JUN 30 AM 9:52

**DOCUMENT # P94000036479 (1)**

1. Corporation Name

**TOTAL CONCRETE FINISHES INC.**

Principal Place of Business

Mailing Address

3218 SW 6TH AVE.  
CAPE CORAL FL 33914

3218 SW 6TH AVE.  
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

05/11/1994

4. FEI Number

65-0491133

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

30 Country

6. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUNNING, DONALD K  
2126 SW 13TH AVENUE  
CAPE CORAL FL 33991

81 Name Joseph A Jablonski

82 Street Address (P.O. Box Number is Not Acceptable)  
3218 SW 6th Ave

83

84 City

CAPE CORAL

FL

85 Zip Code

33914

11. Pursuant to the provisions of Sections 607.0605 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 607.0605, Florida Statutes.

SIGNATURE

*Joseph A Jablonski Pres.*

DATE

6-6-95

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	GUNNING, DONALD K
STREET ADDRESS	2126 SW 13TH AVE.
CITY, ST, ZIP	CAPE CORAL FL 33991
TITLE	D
NAME	JABLONSKI, JOSEPH A
STREET ADDRESS	3218 SW 6TH AVE.
CITY, ST, ZIP	CAPE CORAL FL 33914
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I (we) hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I (we) further certify that the information included in this annual report or biennial annual report is true and accurate and that my resignation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the trustee 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 addendum with an address.

SIGNATURE:

*Joseph A Jablonski Pres.*

6-6-95

275-1218

CR2E034 (3/95)