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

Mailing Address

BOYNTON BEACH FL 33435

940 ISLES RD

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

BOYNTON BEACH FL 33435

940 ISLES RD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400038751 (1)

BERIAU'S CONCRETE CONSTRUCTION INC.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/19/1994 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0561152 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 25 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BERIAU. CHRISTOPHER 940 ISLES RD Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33435** 83 84 City 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 (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE D 1.1 TITLE Change Addition NAME BERIAU. CHRISTOPHER 1.2 NAME STREET ADDRESS 940 ISLES RD 1.3 STREET ADDRESS BOYNTON BEACH FL CITY-ST-ZIP 1.4 City-St-7IP DELETE TITLE 21 TITLE Change ☐ Addition NAMI 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TiTi € DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME

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, group an attachment with an address

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

4-21-0

(56) 188.1123

Addition

FILED

Apr 29 1998 8:00am

Secretary of State

:RZE034 (10/97)