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

PROFIT CORPORATIÓN **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000043561 (7)

SANDY CONCRETE, INC.

O, 11,12								
Principal Pl	ace of Business	Mailing Addres	S				HATEL BILLE BI	INI IANI INDI
1515 RUSSELL AVE 1515 RUSSELL AVE SARASOTA FL 34232 SARASOTA FL 34232							0.05	
						DO NOT WRITE IN THIS SI	PACE	
						3. Date Incorporated or Qualified		
9 Delpoloo	A Place of Projects	Do Mailing Ada	trace			06/10/1994 4. FEI Number		
2. Principal Place of Business 2a. Mailing Address			11622				-	pplied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.			Letc			65-0496176		ot Applicable Additional
22	pr. #, 0,0 .	27	¬			6. Certificate of Status Desired	* · ·	Additiorial equired
City & Si	tate	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Ζŧρ	Co	untry	/	8. This corporation owes or has paid the curre		
24	25 29		30	30		· · · · · · · · · · · · · · · · · · ·		□ No
	9. Name and Address of Curr	ent Registered Agent		I		10. Name and Address of New Registered A	gent	
	MCCALL JR, CHARLES W			81	Name			
1515 RUSSELL AVE SARASOTA FL 34232				82	Street Addr	Address (P.O. Box Number is Not Acceptable)		
•	ANNOVIA I E OTEDE			B3				
				ļ			T1	
				84	City	FL	85 Zip	Code
agent. SIGNATUR						poration submits this statement for the purpose of a tion's board of directors. I hereby accept the appoint when reinstating?		
12.	OFFICERS A	IND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	P DELETE		DELETE 11	TITLE			Change	Addition
NAME	MCCALL JR, CHARLES W		1.2	NAME	Ì			
STREET ADDRES	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1.3	STREET	ADDRESS			
CITY-ST-ZIP	SARASOTA FL			CITY-S	ST-ZIP			
TITLE	•••		TITLE			Change	Addition	
NAME	MCCALL, ELIZABETH L	•		MAME				
STREET ADDRES			F 1		ADDRESS			
CITY-ST-ZIP	SARASOTA FL				S1 - ZIP		Change	gaditi
TITLE		니니	I	TITLE		ι	change	Addition
NAME OXDEET ADDRESS	0.00			NAME	. 1000000			
STREET ADDRES	» (ADDRESS			
CITY-ST-ZIP TITLE		П		TITLE	ST-2IP	1	Change	Addition
NAME		٠.	· ·	NAME		•	U.M.Igo	
STREET ADDRES	28				ADDRESS			
CITY-ST-ZIP	~		•	CHTY-S				
TITLE				ITLE	·····		Change	Addition
NAME	<u> </u>	_		NAME	1	_		_
STREET ADDRES	es		4		ADDRESS			

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 suppliemental 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 an attachment with an address.

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELÉTÉ

FILED

May 18 1998 8:00am

Secretary of State