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

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000079224 (9) **DOCUMENT** #

SUPERIOR CONCRETE PRODUCTS CORPORATION

Principal Place of Business Mailing Address 1950 N.W. 22ND STREET 1950 N.W. 22ND STREET FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/27/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0533555 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 24 25 29 Yes 30 Personal Property Tax due June 30. ΠNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MANDEL, DANIEL S ESQ 2101 CORPORATE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 300 **BOCA RATON FL 33431** 83 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 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE PresideNT HEWRY SILL X Change ☐ Addition GROSMAN, HENRY NAME 1.2 NAME 1950 N.W. 22ND STREET 1950 in 22 St STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIP Ft hunernale 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE SEL/ tres NAME 2.2 NAME Kurt Grossman STREET ADDRESS 2.3 STREET ADDRESS nw 22 St CITY - ST - ZIP 2 4 CITY-ST-ZIP DELETE TITLE 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 ☐ Change 4.1 TITLE ■ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP

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 fursies employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an indirect.

SIGNATURE:

HEWAY SKEEL

Pies.

**FILED** 

Apr 09 1998 8:00am

Secretary of State