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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9500001997 (2)

R & T CONCRETE PUMPING, INC.

Principal Place of Business Mailing Address 3815 GUILDFORD COURT 3815 GUILDFORD COURT ORLANDO FL 32817 ORLANDO FL 32817 3. Date Incorporated or Qualified 3a. Date of Last Report 01/06/1995 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Ζφ Country 210 Florida Statutes Yes No 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HODGES, ROBERT V Street Address (P.O. Box Number is Not Acceptable) 3815 GUILDFORD COURT 83 ORLANDO FL 32817 Zin Code 84 City 85 11. Pursuant to the provisions of Sections 607.050? and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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. (NOTE: Registered Agent signature required when reinstating) typied or printed name of registered agent and title it applicance ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition PRODUCT V. HODGES DELETE 1. 1 TITLE THATE 1.2 NAME NAM 1.3 STREET ADDRESS SPREEL ADORESS 1.4 CITY - ST - ZIP CHY SI-ZE Addition Change DELETE 2 1 TITLE THEF 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 24 CITY - ST - ZIP City - St. ZiP Addition Change DELETE 3 1 TITLE Trite 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - 2IP CHY+SI-ZIP Change ☐ Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST ZIE ☐ Addition DELETE 5.1 TiTUE 70117

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 corp ration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in prock 12 or Block 13 highlanged, or tyn an attachment with an address.

52 NAME

6 1 TITLE

6.2 NAME

5.3 STREET ADDRESS

63 STREET ADDRESS

64 CITY-ST-ZIP

5 4 CITY - ST-ZIP

SIGNATURE:

NAME

Tille

NAME

STREET ADDRESS

STREET ADDRESS

CHY ST-26

PORET V. HONGES

☐ DELETE

3)4/94 (407)679-4339

Change

☐ Addition

CR2E034 (12/95)