

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

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000001997 (2)

1. Corporation Name

R & T CONCRETE PUMPING, INC.

Principal Place of Business

3815 GUILDFORD COURT
ORLANDO FL 32817

Mailing Address

3815 GUILDFORD COURT
ORLANDO FL 32817



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 10420 Kirby Smith Rd		26 P.O. Box 720188		01/06/1995	
22 Suite, Apt. #, etc		27 Suite, Apt. #, etc		4. FEI Number	
23 Orlando, Florida		28 Orlando, Florida		59-3289491	
24 32832-5931		29 32872-0188		5. Certificate of Status Desired	
25 USA		30 OR USA		<input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
HODGES, ROBERT V 3815 GUILDFORD COURT ORLANDO FL 32817		81 Name Hodges, Robert V.			
		82 Street Address (P.O. Box Number is Not Acceptable)			
		10420 Kirby Smith Road			
		83			
		84 City Orlando FL 85 Zip Code 32832-5931			

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 607.0605, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title, if applicable)

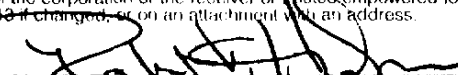
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	HODGES, ROBERT	1.2 NAME	Hodges, Robert
STREET ADDRESS	3815 GUILDFORD COURT	1.3 STREET ADDRESS	10420 Kirby Smith Rd
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, FL 32832-5931
TITLE	VST	2.1 TITLE	VST
NAME	HODGES, THERESA J.	2.2 NAME	Hodges, Theresa J.
STREET ADDRESS	3815 GUILDFORD COURT	2.3 STREET ADDRESS	10420 Kirby Smith Rd
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, FL 32832-5931
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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.

SIGNATURE:



2/20/98 (407) 381-5115

CR2E034 (10/97)