

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000032390

FILED
Apr 30, 2008
Secretary of State

Entity Name: JUST CONCRETE & MASONRY, INC.

Current Principal Place of Business:

3583 S.R. 419
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

PO BOX 196205
WINTER SPRINGS, FL 32719

New Mailing Address:

FEI Number: 59-3308748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, PETER A
3583 S.R. 419
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CRUZ, PETER A
Address: 4500 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: ST () Delete
Name: CRUZ, CORINNA A
Address: 4500 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: V () Delete
Name: THOMPSON, DALE A
Address: 32638 APPALOOSA TR
City-St-Zip: SORRENTO, FL 32776

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CRUZ, CORINNA
Address: 4500 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: ST (X) Change () Addition
Name: CRUZ, CORINNA
Address: 4500 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: V (X) Change () Addition
Name: CRUZ, PETER
Address: 4500 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: V () Change (X) Addition
Name: THOMPSON, DALE
Address: 32638 APPALOOSA TR
City-St-Zip: SORRENTO, FL 32776

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORINNA CRUZ

DP

04/30/2008

Electronic Signature of Signing Officer or Director

Date