## 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

DOCUMENT # P95000034076 (6)

MCKENZIE CONCRETE, INC.

## **FILED** May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			*	- I IOBIIIOOR ING (BIO) OHIII OOIII OOIII OOIII OOIII	O REEL BLOCK BOOK ESOND DIN SOUL
20620 S.W. 119TH COURT 20620 S.W. 119T		20620 S.W. 119TH COURT			
MIAMI FL 33177		MIAMI FL 33177		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	113 SPACE
				05/02/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 21Y20SW	119ct	65-0577657	Not Applicable
Suite, Apt.	#, <b>el</b> c.	Suite, Apt #, etc.	• • • • • • • • • • • • • • • • • • • •	_	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	3	City & State	7/	6. Election Campaign Financing	\$5.00 May Be
23		28 WUAWI	71	Trust Fund Contribution	Added to Fees
Zip	Country	- ZP22 /22 -	Country	8. This corporation owes or has paid the	
24	25	29	DACE	Personal Property Tax due June 30.  10. Name and Address of New Register  10. Personal Property Tax due June 30.	Yes No
					ou Agent
MUKENZIE, WILLIAM			Hame		
20820 SW 119 CT			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33177			63		
			84 City		85 Zip Code
44 D. 41 M. COT 07.00 and COT 17.00 Floride Class to a share parent or submits this statement for the purpose of charging its society and					
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 fappliar with, and accept the obligations of Spelion 607.0505, Florida Statutes.					
SIGNATURE Signature. A product and the disposable (NOTE: Registered Agent signature required when reinstating)  DATE  Output  DA					20/1010
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	MCKENZIE, WILLIAM		1.2 NAME		
STREET ADDRESS	20620 SW 119 CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33177		1.4 CITY - ST - ZIP		
TITLE	V\$D	DELETE	2.1 TITLE		Change Addition
NAME	MCKENZIE, RUFUS		2.2 NAME		
STREET ADDRESS	20620 SW 119 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33177	Delete	2. 4 CITY-ST-ZIP		Change Addition
TITLE	 NOVENTIE TUEDDO	☐ DELETE	3.1 TITLE		C cuange C Audullon
NAME	MCKENZIE, THERDO 20620 SW 119 CT		3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS	MIAMI FL 33177		• • • • • • • • • • • • • • • • • • • •		}
CITY-ST-ZIP TITLE	MIAMI EL SOTT	DELETE	3 4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		hand water to	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5 1 TITLE	1	☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY+ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby o	certify that the information supplied v	with this filing does not qualify for t	he exemption stated i	n Section 119.07(3)(i), Florida Statutes. I furthe	or 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.