

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 11, 1999 8:00 am**  
**Secretary of State**

03-11-1999 90167 007 \*\*\*150.00

DOCUMENT # **P95000035351**

1. Corporation Name

**OLMSTEAD CONCRETE, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**6331 S.W. 41ST STREET  
DAVIE FL 33324**

Mailing Address  
**6331 S.W. 41ST STREET  
DAVIE FL 33324**

3. Date Incorporated or Qualified

**05/01/1995**

4. FEI Number

**65-0579298**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip Country

9. Name and Address of Current Registered Agent

**NELSON-OLIPHANT, DARLENE  
2071 SW 70TH AVE  
STE G-8  
DAVIE FL 33317**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** 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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DPT** ☐ DELETE  
NAME **OLMSTEAD, RONALD**  
STREET ADDRESS **6331 S.W. 41ST STREET**  
CITY-ST-ZIP **DAVIE FL 33324**

TITLE **DS** ☐ DELETE  
NAME **OLMSTEAD, KELLIE**  
STREET ADDRESS **6331 SW 41ST ST**  
CITY-ST-ZIP **DAVIE FL 33324**

TITLE **VP** ☐ DELETE  
NAME **LITTON, STEVE L**  
STREET ADDRESS **8067 NW 10TH ST**  
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE **VP** ☒ DELETE  
NAME **LEE, GARY A**  
STREET ADDRESS **9888 NW 54TH PLACE**  
CITY-ST-ZIP **CORAL SPGS FL 33076**

TITLE **VP** ☐ DELETE  
NAME **ROZADA, JUAN S**  
STREET ADDRESS **5721 SW 40TH ST**  
CITY-ST-ZIP **HOLLYWOOD FL 33023**

TITLE **VP** ☒ DELETE  
NAME **STUBBS, DOUGLAS M**  
STREET ADDRESS **1507 NW 29TH AVE**  
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**R. OLMSTEAD, PRES** 3/12/99 954 584-1471

CR2E034 (11/98)