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 # P95000042051 (9)
1. Corporation Name

CONCRETE ACCESSORIES, INC.

Principal Place of Business

Mailing Address

288 CLEARLAKE ROAD COCOA FL 32922

STREET ADDRESS

CITY-ST-ZIP

T.

288 CLEARLAKE ROAD COCOA FL 32922

FILED May 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/24/1995 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-3317532 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State Flection Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Ζip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent INGRAM, CHARLES 288 CLEARLAKE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) COCOA FL 32922 83 City 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 ponted name of regestered a jest as dittle if applicable (NCITE: Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME INGRAM, CYNTHIA 1.2 NAME STREET ADDRESS 1801 HUDSON DR. 1.3 STREET ADDRESS ROCKLEDGE FL 32955 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE NAME INGRAM, CHARLES 2.2 NAME STREET ADDRESS 1801 HUDSON DR. 2.3 STREET ADDRESS CITY-ST-ZIP ROCKLEDGE FL 32955 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE NAME 6.2 NAME

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 suppliemental annual report to rue 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 of the receiver or trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 an an attanhment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP