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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000042794 (4)

ABOVE ALL CONCRETE, INC.

Principal Place of Business		Mailing Address 13370 S.W. 131ST ST.			DINI OBNIK OLOKO KIOKO KOOKO KOKI OKO (100)
13370 S.W. 131ST ST. BUITE 112		SUITE 112			
MIAMI FL 3316	rc	MIAMI FL 33186-5884		3. Date Incorporated or Qualified 05/24/1995	3a. Date of Last Report 06/05/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	···	65-0589479	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	}-	50]	 This corporation has liability for Florida Statutes 	Intengible tax under s. 199.032, Ves No
- · · · · · · · · · · · · · · · · · · ·	9. Name and Address of Current			10. Name and Address of New R	
	PPOLA, JOSEPH J		81 Name		
19370 G.W. 131ST S T.			82 Street Add	ress (P.O. Box Number is Not Accepte	ble)
MAMI FL 33198 Many & address			83	to 222	reet
_	William	y of abovers	84 City No.	12 21/	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Statutes	s, the above-named cor	poration submits this statement for the	number of changing to 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	- Muceu (A	undlu			5/13/97
12.	Signature, typed or printed name of registered ager OFFICERS AND		Registered Agont signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TifLE	ADDITIONS CHANGES TO CITY	Change Addition
NAME	COPPOLA, JOSEPH J		1.2 NAME		
STREET ADDRESS	14542 S.W. 147TH CT.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33196		1.4 CITY-ST-ZIP		
TITLE	D and a success	☐ DELETE	21 TITLE		Change Addition
NAME	COPPOLA, SUSAN		2.2 NAME		
STREET ADDRESS	14542 S.W. 147TH CT. MIAMI FL 33196		2.3 STREET ÅDDRESS		
CITY-ST-ZIP TITLE	MIPMITE 33180	DELETE	2.4 CITY-ST-ZIP		☐ Change ☐ Addition
NAME			3.1 TITLE 3.2 NAME		Change C Audition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	<u> </u>	DELETÉ	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		<i>VK7</i>
STREET ADDRESS			5 3 STREET ADDRESS		'% (\)
CITY-ST-ZIP			5 4 CITY-ST-ZIP		3(0)
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME	70000220 -06/04/97010	00867
STREET ADDRESS			63 STREET ADDRESS	-06/04/97010	109022

14. I do 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 grianged, or on an attarhment with an address.

***550.00

FILED

May 21 1997 8:00am

Secretary of State