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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000045341 (1)

VON'S CONCRETE, INC.

Principal Place of Business Mailing Address 744 FAIRMOUNT RD 744 FAIRMOUNT RD DAYTONA BEACH FL 32114-1835 DAYTONA BEACH FL 32114 3a. Date of Last Report 3. Date Incorporated or Qualified 05/31/1995 10/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3320656 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional \mathbf{Z} 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THOMPSON, LOUVONIA 81 Name 744 FAIRMOUNT RD 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 84 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. Fair familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. QUVINA Thompson SIGNATURE VOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DELETE Change Addition TITLE 11 TOLE THOMPSON, LOUVONIA NGME 12 NAME 744 FAIRMOUNT RD 1.3 STREET ADDRESS STREET ACCORESS DAYTONA BEACH FL 32114 1.4 CITY - ST- ZIP CITY ST ZIF DELETE Change Addition THLE 2.1 TITLE 2.2 NAME 500,019 STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CHY SI DELETE Change Addition Hill 31 TITLE DAME 3.2 NAME 3.3 STREET ADDRESS

64 City St-7P

14. If 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 12 or Block 13 or on an attachment with an address.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS 4.4 City-St-Zip

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.1 TITLE

4 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS COTY - ST - ZIP

STREET ADDRESS

CITY-ST 74P

COLF-ST ZIP

STREET ADORESS

70114

NAV:

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NAME STREET ACORESS

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NAME

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

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Secretary of State

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