PROFIT CORPORATION ANNUAL REPORT  1996  PROFIT FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS					
DOCUMENT # P95000049209 (6)  C & S CONCRET PUMPING INC.					
Casc	ONCRET PUMPING INC	<b>,</b>			
Principal Place	of Business	Mailing Address			<b>1741   1711   1714   1716   1716   1716   1716   1716   1716</b>
138 CHARLOTTE STREET P.O. BOX 155					
WINTER GARDE	EN FL 34787	GOTHA FL 32734		3. Date Incorporated or Qualified	
	(D)	D. Mailing Address		06/21/1995 4. FEI Number	<b>O6/21/4995</b> Applied for
2. Principal Pla	Charlotta St.	2a. Mailing Address 26 P.O. BOX IS	3	59327033	O Not Applicable
Suite Apt #	, etc.	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
3 Wint	er Garden Flexid	28 Gotha F	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
Zip 24 - 34787	├ŋ · · · · · ·	— ¬	30 Orange	Florida Statutes	Yes No
	9. Name and Address of Cur	rrent Registered Agent	81 Name	10. Name and Address of New F	Registered Agent
	ARS, CRAIG A			ress (P.O. Box Number is Not Accept	able)
WHITED CAPIEN EL 24707				Toda (r.o. box Iranion is recrised)	
*****			83		
			64 City		FL 85 Zip Code
11. Pursuant to office or re	o the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes late of Florida, Such change was au	s, the above-named corporate thorized by the corporate	oration submits this statement for the ion's board of directors. I hereby acce	purpose of changing its registered ept the appointment as registered
	n familiar with, and accept the ob	ul gations of, Section 607.0505, Flori	ida Statutes		
	Signature typed or printed name of registeres	3 4 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Registered Agent's gnature requ		FICERS AND DIRECTORS IN 12
TULE	PVST	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Section 12 Change Addition
NAME	SPEARS, CRAIG A		1.2 NAME		E034
STREET ADDRESS	138 CHARLOTTE STREET	07	1 3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE	WINTER GARDEN FL 3476	DELETE	1 4 CHY - ST - ZIP 2 1 TITLE		Change Addition
NAME	SPEARS, CRAIG A		2 2 NAME		
STREET ADDRESS	138 CHARLOTTE STREET		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE	WINTER GARDEN FL 347	DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS		•	3.3 STREET ADDRESS 3.4 City - ST- ZIP		
CITY - ST - ZIP TITLE	<del>(</del>	DELETE	41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS 4 4 CITY - ST - 21P		
CITY-ST-ZIP TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS 5 4 CITY - ST- ZIP		
CITY - ST - ZIP TITLE		DELETE	6 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS CITY-ST-ZIP			6 3 STREET ADDRESS 6 4 CHY - ST - 7P		
14. I do hereb			nished and does not qu	alify for the exemption stated in Section and accurate and that my signature s	
made und that my na	der oath, that I am an officer or di ame appears in Block IP or Block	region of the corporation or the received if changed, or on an attachmen	iver or trustee empower it with an address	ed to execute this report as required t	by Chapter 617, Florida Statutes; and
	l'as "	her			1
SIGNAT	UHE: SIGNATURE OF TYR	D OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	right spend 20	-46 (407) 656-6132
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