## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95

P95000057301 (0)

A & D CONCRETE SAWING & DRILLING, INC.

| Principal Place of Business Mailing Address  3101 OLEANDER AVENUE BAY 8 3101 OLEANDER A FORT PIERCE FL 34982 FORT PIERCE FL 3 |  |                             | /ENUE BAY 8<br>1982                             | NUE BAY 8   |  |
|---|--|-----------------------------|---|---|--|
| 9 5   |  |                             |   | 3. Date Incorporated or Qualified 3a. Date of Last Report 07/24/1995  |  |
| 104   |  | 2a. Malang Address          |   | 4. FEI Namber Applied For   |  |
| Suite, Apt. #, etc.   |  | 26                          |   | 65-0599030 Not Applicable   |  |
| 22  |  | Suite, Apt. #, etc.         |   | \$9.75  |  |
| City & State  | 3  | City 8 State                |   | Fee Required  |  |
| 23  |  | 28                          |   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  |  |
| Zip   | Country  | Zip                         | Country   | Added to Fees     In a corporation has liability for intangible tax under s 199.032,  |  |
| 24  | 25   | 29                          | 30  | Florida Statutes Yes No   |  |
|   | 9. Name and Address of Curren  | t Registered Agent          |   | 10. Name and Address of New Registered Agent  |  |
| AVEOV   | Ollabiro   |                             | 81 Nam  | 16  |  |
| AVERY, CHARLES<br>6000 SEAGRAPE DRIVE   |  |                             | 82 Stree  | et Address (P.O. Box Number is Not Acceptable)  |  |
|   | PERCE FL 34982   |                             | L. I  |   |  |
| runir   | TERUE FL 34982   |                             | 83  |   |  |
|   |  |                             | 84 City   | 05 70 Code  |  |
| 11. Pursuant to   | the provisions of Sections 607 05.02   | and 607 1600 Fluids 644     |   | FL 85 Zip Code  |  |
| or registere<br>familiar wit  | ed agent, or both, in the State of Fikiric   | a. Such change was authoriz | es, the above hamed<br>led by the corporation   | corporation submits this statement for the purpose of changing its registered office is board of directors. Thereby accept the appointment as registered agent. Lam   |  |
| SIGNATURE   | and decept are obligations or, Section   | ? n.                        | · A   | P   |  |
|   | Signature, Typed or prested manie of registered against  | chair Chai                  | les thery                                       | Tresident 4/26/96   |  |
| 12.   | OFFICERS AND   | DIRECTORS                   | ™ கழக்க (Ajrid sig(≀ரி<br>13.                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |  |
| TITLE   | PD   | DECE TE                     | 1 1 TITLE                                       | <b>6</b>  |  |
| NAME  | Dunajewski, julius   |                             | 1.2 NAME  | Change Addition   |  |
| STREET ADDRESS  | 900 JACKSON WAY  |                             | 1.3 STREET ADDRESS                              | Dunajewski, Julius<br>900 Jackson Way   |  |
| CITY - ST - ZIP   | HUTHINSON ISLAND FL 349  | 49                          | 1.4 City - \$7 - ZiP                            | Hutchinson Island, Fr 34949   |  |
| TITLE   | STD  | ☐ DELETE                    | 2 1 TITLE                                       | Po Change Addition  |  |
| NAME<br>EIDEET ADODECC  | AVERY, CHARLES   |                             | 2 2 NAME  | Avery, Charles  |  |
| STREET ADDRESS  | 6000 SEAGRAPE DRIVE  |                             | 2 3 STREET ADDRESS                              | 6000 Season Delve   |  |
| ITLE  | FORT PIERCE FL 34982   |                             | 24 CITY-ST ZiP                                  | Fort Pierce, FL 34982   |  |
| AME   |  | DELETE                      | 3 1 TITLE                                       | ☐ Change ☐ Addition   |  |
| TREET ADDRESS   |  |                             | 3 2 NAME  |   |  |
| ITY-ST-ZIP  |  |                             | 3.3 STREET ADDRESS                              | ·   |  |
| TLE   |  | DELETE                      | 3 4 C TY - ST - ZiP                             |   |  |
| AME   |  | occen                       | 4 1 7/1LE                                       | ☐ Change ☐ Addition   |  |
| TREET ADDRESS   |  |                             | 4 2 NAME  |   |  |
| ITY-ST-ZIP  |  |                             | 4.3 STREET ADDRESS                              |   |  |
| TLE   |  | ☐ DELETE                    | 44 CITY - ST - ZIP<br>5 1 TILLE                 | •   |  |
| AME   |  | hand k                      | 5.2 NAME  | Change Addition   |  |
| TREET ADDRESS   |  |                             | 5.3 STREET ADDRESS                              |   |  |
| TY-ST-ZIP   |  |                             | 5.4.CITY - ST - ZIP                             |   |  |
| TLE   |  | DELFTE                      | 6 1 TITLE                                       |   |  |
| AME   |  |                             | 6.2 NAME  | Change Addition   |  |
| REET ADDRESS  |  |                             | 6.3 STREET ADDRESS                              |   |  |
| TY-ST-ZIP   |  |                             |   |   |  |
|   | certify that the information supplied wit<br>le information indicated on this annual<br>m an officer or director of the corpora<br>lock 12 or Block 13 if changed, or on |                             | hed and does not qua<br>a report is true and ac | sty for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further excurate and that my signature shall have the same legal effect as if made under eithis report as required by Chapter 607, Florida Statutes, and that my name |  |

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles Avery

4/26/80 407-467-1155