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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000011412

1. Corporation Name

THE CONGRETE 200, INC.	
Principal Place of Business	Mailing Address
7541 BRISTOL LANE	7541 BRISTOL LANE

## Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90266 042 \*\*\*150.00

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Principal Plac	e of Business	Mailing Address				1		lik Boiki Oviox				
7541 BRISTOL		7541 BRISTOL LANE				1						
PARKLAND FL 33067 PARKLAND FL 33067				-								
						<u> </u>	DO NOT WRI	TE IN THIS	SPACE			1
						3.	Date Incorporated or Qualifed					İ
3 Principal P	lace of Business	2a. Mailing Address					02/02/1996 FEI Number			Ammit	ad Fa-	1
2. Fillicipal F	lace of business	2a. Mailing Address				4.	65-0637110		┝╂		ed For oplicable	1
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				+	00 0007 110	<u> </u>	\$8.7		• • • • • • • • • • • • • • • • • • • •	1
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City & Stat	e	City & State				6.	Election Campaign Financing		\$5.0	00 ма	av Be	1
23		28				"	Trust Fund Contribution			ed to F		İ
Zip	Country	Zip	Cou	ntry		8.	This corporation owes the curr	ent year Inta	angible			
24	25		30	,		}	Personal Property Tax.		Yes		No	
<u> </u>	9. Name and Address of Cur	rent Registered Agent				10.	Name and Address of New F	legistered .	Agent _			
CI II I	TON, DEAN C			81 N	lame				, (			
	BRISTOL LANE		•	<b>82</b> S	treet Addre	ess (P	O. Box Number is Not Accepta	ble)				
	KLAND FL 33067											
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11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	ite of Florida. Such change was a	es, the at uthorized	oove-na	amed corpo	oratior on's bo	a submits this statement for the pard of directors. I bereby accer	purpose of a	changing itment as	its reg regist	gistered tered	í
					corporation			и инстаррои				ļ
	m familiar with, and accept the obl	igations of, Section 607.0505, Flor			corporation		and of directors. Thoropy decep	и инс аррои		-		ļ
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agent. I a	Signature, typed or printed name of registered	igations of, Section 607.0505, Flor agent and title if applicable. (NOTE:	ida Statu Registered	ates.	nature required		einstating)	DATE	n niper	TOPS		100
agent. I a	Signature, typed or printed name of registered OFFICERS	igations of, Section 607.0505, Flor	ida Statu	ates. Agent sign	<u>'</u>			DATE	D DIREC		IN 12 ☐ Addition	100,1
agent. I a	Signature, typed or printed name of registered OFFICERS	igations of, Section 607.0505, Flor agent and title if applicable. (NOTE: AND DIRECTORS	Registered 13.	Agent sign	<u>'</u>		einstating)	DATE				4 (44 /00)
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14. 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 the 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR