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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000082468 (5)

1. Corporation Name
BECKMAN CONCRETE & MASONRY, INC.

Principal Place of Business
23475 HARPER AVE.
PORT CHARLOTTE FL 33980

Mailing Address
23475 HARPER AVE.
PORT CHARLOTTE FL 33980-3008

3. Date Incorporated or Qualified
10/07/1996

3a. Date of Last Report

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 9225 STRASSE BLVD
Suite, Apt. #, etc.

26 9225 STRASSE BLVD
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Punta Gorda Fla.

28 Punta Gorda Fla.

24 Zip 33982

25 Country Charlotte

29 Zip 33982

30 Country Charlotte

9. Name and Address of Current Registered Agent

BECKMAN, ROBERT
23475 HARPER AVE.
PORT CHARLOTTE FL 33980

10. Name and Address of New Registered Agent

81 Name Beckman Robert

82 Street Address (P.O. Box Number is Not Acceptable)

9225 STRASSE BLVD

83

84

City Punta Gorda

FL

85 Zip Code 33982

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BECKMAN, ROBERT
STREET ADDRESS 23475 HARPER AVE.
CITY-ST-ZIP PORT CHARLOTTE FL 33980

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT
1.2 NAME
1.3 STREET ADDRESS 9225 STRASSE BLVD
1.4 CITY-ST-ZIP PUNTA GORDA FL 33982

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE:

Robert M Beckman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-97 941-505-2096
Date Daytime Phone # 941-505-1191

CR2E034 (9/96)