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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000092260 (4)

KEN'S CONCRETE, INC.

Principal Place of Business Mailing Address 850 DARLINGTON AVENUE. SW 460 DARLINGTON AVENUE, SW PALM BAY FL 32908 PALM BAY FL 32908 DO NOT WRITE IN THIS SPACE 3, Date Incorporated or Qualified 11/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3419197 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zıp Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes ☐ No Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROWLAND, KENNETH A 850 DARLINGTON AVENUE, SW **B2** Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32908 63 City Zip Code 85 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 (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change Addition ROWLAND, KENNETH A 1.2 NAME 850 DARLINGTON AVENUE, SW STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 32908 CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE Addition 2.1 TITLE Change CLASEN, MIKE NAME 2.2 NAME 1087 FLOWE AVE NW STREET ADDRESS 23 STREET ADDRESS PALM BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

54 CITY-ST-ZIP

4 4 CITY - ST- ZIP

5 1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

☐ DELETE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

41,5/98

407-901-1079

☐ Change

☐ Change

Addition

Addition

FILED

Apr 24 1998 8:00am

Secretary of State