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## **PROFIT** CORPORATION ANNUAL REPORT 1998

ELORIDA DEPARTMENT DE STATE

Sandra B. Mertham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700007271 SUPER CONCRETE DESIGN BY GEORGE, INC.

## **FILED** Mar 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1000 SW 18 AVE 1000 SW 18 AVE **MIAMI FL 33135 MIAMI FL 33135** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0719906 Not Applicable 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Ζıp Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ, JORGE L 1000 SW 18 AVE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33135** 11815 SW 37 Street 83 City **Miami** 84 85 Zip Code 33175 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 affice 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 profed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE 1.1 TITLE XX Change Addition HERNANDEZ, JORGE L NAME 1,2 NAME 1000 SW 18 AVE STREET ADDRESS 1.3 STREET ADDRESS 11875 SW 37 Street Miami, FL. 33175 MIAMI FL 33135 CITY-\$1-7IP 1.4 CITY-ST-ZIP Change TITLE DELETE 2.1 TITLE Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE \_\_ Change ☐ Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-S1-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 13 if change for on an attachment with an extress.

SIGNATURE: