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 # **P97000031611**1. Corporation Name

CONCRETE SAND, INC.

| Principal Place | e of Business | Ma | illing Address | | | | | 1100000 | . 110 1011) 10011 0011 | | | |
|---|--|-----------|--|---------------------|---|--------------|---------------|----------------------------|------------------------|----------------|------------|--|
| 1904 LISBENBY AVE P O BOX 35425 | | | | | | | | | | | | |
| PANAMA CITY FL 32405 PANAMA CITY FL 32405 | | | | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| US | | US | | | | | - | 3. Date Incorpo | orated or Qualifed | | | **** |
| | | | | | | | | 04/07/199 | | | | |
| 2. Principal P | tace of Business | 2a. | Mailing Address | | | | $\overline{}$ | 4. FEI Number | | | \Box | Applied For |
| 21 | | 26 | P.O. Box 35 | 425 | | | | 59-34610 | 04 | | | Not Applicable |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | | 5. Certifcate of | | <u>**</u> | \$8.75 | 5 Additional |
| 22 | | 27 | | | | | | 5. Cerdicale of | Status Desired | L.J. | | Required |
| City & State | 0= | | City & State | === | | | | 6. Election Car | npaign Financing | | | 0 May Be |
| 23 | | 28 | Panama City | | | | | Trust Fund (| Contribution | | Adde | ed to Fees |
| Zip | Country | <u> </u> | Zip | _ | untry | | | • | ition owes the cu | rrent year Int | | □N- |
| 24 | 25 | 29 | | 30 | US | | | Personal Pro | <u> </u> | Demistered | Yes | □No |
| | 9. Name and Address of Currer | nt Regist | tered Agent | | 81 | Name | | 10. Name and | Address of New | Registered | Agent | |
| SIKE | ES, HUBERT L JR. | | | | ["] | Hallic | | | | | | · - |
| 129 PALM HARBOUR BLVD | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | AMA CITY BEACH FL 32408 | | | | 83 | 190 | 14 <u>Li</u> | senby Ave | 2 | | | |
| TAN | ANIA OTT BEACTITE 32400 | | | | 03 | | | | | | | |
| | | | | | 84 | City | ama | 015 | | | 85 Z | ip Code 2405 |
| | | | | | <u> </u> | | | | | FL | | |
| office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga | of Florid | la. Such change was at Section 607.0505, Flor | ithorize ida Sta | ed by total | the corpo | oration's | board of direct | ors. I hereby aco | ept the appoi | intment as | registered |
| SIGNATURE | There In | -4. | | | | | | | | | | |
| OIGITATORE | Signature typed or minted harm of egistered age | | <u> </u> | | | signature re | nw beniuper | en reinstating) | | DATE | | ************************************** |
| 12. | OPFICERS AN | 10 DIRE | | 13 | - | | T** | ADDITIONS/0 | CHANGES TO O | FFICERS AN | | |
| TITLE | S | | ☐ DELETE | | TITLE | | P | | | | Chang | ge 😡 Addition |
| NAME | BOWEN, STACIE | | | • | NAME | | | es, Huber | | | | |
| STREET ADDRESS | 9315 GOBBLER CIR | | | 1 | | ADDRESS | | 4 Lisenby | | _ | | |
| CITY-ST-ZIP | SOUTHPORT FL 32409 | | O RELETE | _ | CITY-ST | -ZIP | Pan | ama City | FL 3240 | <u> </u> | [7] Chang | ie |
| TITLE | | | ☐ DELETE | | TITLE | | • | | | | | de 🖸 vogurou |
| NAME | | | | | NAME | | | | | | | |
| STREET ADDRESS | ļ | | | | | ADDRESS | | | | | | |
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| NAME | | | | | NAME | | | | | | | |
| STREET ADDRESS | | | | | | ADORESS | | | | | | |
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| STREET ADDRESS | | | | | | ADDRESS | | | | | | |
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| STREET ADDRESS | 1 N 1 N 1 | | | ■ 6.3 | STREET | ADDRESS | 1 | | | | | |

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 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 or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90227 026 ***158.75