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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 16 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700064939 (6)

i. Corporati	OFFINALLIE						ļ					
BDC	ONCRETI	e pumping, inc					- 1					
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Principal Pla	ce of Busine	SS	Mailing	Address					i deni edin bi			
i i		ARK ROAD SUITE 4364	-	VEST PALMETTO	PARK ROAD	SHITE 436	64					
	N FL 33434	THE HOND COME 4004		RATON FL 33434	Ann nono	0011E 400		20.410	MOITE AL	T. 110 0D 1 05		
ļ							-	3. Date incorporated or Qu		THIS SPACE		٦
								07/28/1997	aillea			
2. Principal Place of Business			2a. Mai	2a. Mailing Address				4. FEI Number		A	applied For	1
21			26					59-3466	196		lot Applicable]
Suite, Apt. #, etc.			—	Suite, Apt. #, etc.				5. Certificate of Status Desi	red 🗆		Additional Required	1
City & State				City & State				6. Election Campaign Finar	icipa			┨
23			28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	p Country		Zip	Zip		Country		8. This corporation owes or	has paid th	ne current year Ir	ntangible	1
24	25 29 29 29 29 29 29 29 29 29 29 29 29 29			30			Personal Property Tax due June 30, Yes No					
			ent Hegisterec	Agent	81	Name		10. Name and Address of I	lew Regist	ered Agent		┨
HRAWG CORP.						Ro	600	T. S. Do Vos				
7040 WEST PALMETTO PARK ROAD SUITE 4364 BOCA RATON FL 33434					82) Sileot /	Muules	(P.O. Box Number is Not A		ACF.		
	OOA HATOI	116 00404			83		<u>/ ₩</u>	U / C B P V / P P	1 U KA	.768		1
					84	City				last 7:-	Carla	ł
						130	OCA	KATON		FL 1.83	Code 3433	
11. Pursuant	to the provis	sions of Sections (7)7.0	502 and 607.15	08, Florida Statut	es, the above	e-named	corpora	ation submits this statement f 's board of directors. I hereb	or the purpo	ose of changing	its registered	1
agent. I	am familiar w	ith and actopy ie do	light of Sec	tion 607.0505, Ft	orida Statute	s.	-	1/	у досорг пл			
SIGNATURE		or printed numeral registates	gent and title if appl-	Callo (NOT	E: Registered Age		required v	then reinstalland		3-1-98	<u> </u>	٦
12.			ND DIRECTOR		13.			ADDITIONS/CHANGES TO	OFFICERS	AND DIRECTO	RS IN 12	þ
TITLE				DELETE	1.1 TITLE		PKB.	SIDENT .		Change	Addition	10/0
NAME					1.2 NAME		Rob	ORT S. DOVO.	, , , , , , , , , , , , , , , , , , , ,	سرمدو		5
STREET ADDRESS					1.3 STREET	I	229	2 GROWNVIOU				ĬŽ
CITY-ST-ZIP TITLE	 			DELETE	1.4 C(TY - S 2.1 T(TLE	ST-ZIP	800	A KATON FL	774	☐ Change	Addition	è
NAME					2.1 TILE 2.2 NAME					Charige	C) Addition	`
STREET ADDRESS					2.3 STREET	ADORESS						
CITY-ST-ZIP	l				2. 4 CITY-1							
TITLE				DELETÉ	3.1 TITLE					Change	Addition	
NAME					3.2 NAME							
STREET ADDRESS					3.3 STREET	ADDRESS						
CITY-ST-ZIP TITLE				DELETE	3.4. CITY-S	ST-ZIP				☐ Change	Addition	l
NAME				□ DELETE	4.1 HILE 4. 2 NAME					Change	L., Audilion	
STREET ADDRESS					4							
CITY-ST-ZIP					4.3 STREET	ADDRESS I						
	1				4.3 STREET 4.4 CITY - S							
TITLE				DELETE	4.3 STREET 4.4 CITY - S 5.1 TITLE		· · · · ·			☐ Change	☐ Addition	
				☐ DELET E	4.4 CITY - S					☐ Change	Addition	
TITLE				☐ DELETE	4.4 CITY - S 5.1 TITLE	T- Z IP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					4.4 CITY - S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY - S	T-ZIP ADDRESS						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					4.4 CITY - S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY - S	T-ZIP ADDRESS T-ZIP						

14. I hereby certify that the information supplied with this filling 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 changing of on an attachment with an address.

6.4 CITY-ST-ZIP