

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91427 017 ***150.00

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DOCUMENT # P97000070127

1. Entity Name
J & S CONCRETE OF BREVARD, INC.



Principal Place of Business
**5161 PALMETTO AV
COCOA FL 32926
US**

Mailing Address
**5161 PALMETTO AV
COCOA FL 32926**



2. Principal Place of Business
4555 South Street
Suite, Apt. #, etc.

3. Mailing Address
4555 South Street
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Titusville, Fl.

City & State
Titusville, Fl.

4. FEI Number
59-3464853

Applied For
☐ Not Applicable

Zip Country
32780 U.S.A.

Zip Country
32780 U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BREMMER, SONYA
5161 PALMETTO AV
COCOA FL 32926**

Name
Bremmer, Sonya
Street Address (P.O. Box Number is Not Acceptable)
4555 South Street

City
Titusville, FL Zip Code
32780

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Sonya M. Bremmer*
Signature, typed or printed name of registered agent and title if applicable.

Sonya Bremmer, President

4-24-03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D BREMMER, SONYA
5161 PALMETTO AV
COCOA FL 32926** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD Bremmer, Sonya
4555 South Street
Titusville, Fl. 32780** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sonya M. Bremmer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sonya Bremmer, President (321)385-1517

Date

Daytime Phone #

CR2E034 (10/02)