2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 13, 2008
Secretary of State

DOCUMENT# P97000071401

Entity Name: CAST-CRETE CORPORATION

Current Principal Place of Business:

6324 COUNTY RD.,579
TAMPA, FL 33623 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 24567
TAMPA, FL 33623

New Mailing Address:

FEI Number: 59-3466922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAREY, MICHAEL R
712 SOUTH OREGON AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: STANTON, JOHN
Address: POST OFFICE BOX 24567
City-St-Zip: TAMPA, FL 33623 US

Title: D ( ) Delete
Name: HUGHES, RALPH W
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

Title: D ( ) Delete
Name: KARDASH, WILLIAM J
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

Title: D (X) Delete
Name: ROBB, CHARLES K
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

Title: D (X) Delete
Name: PARRINO, CRAIG
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: KARDASH, WILLIAM J
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

Title: D (X) Change ( ) Addition
Name: ROBB, CHARLES K
Address: P.O. BOX 24567
City-St-Zip: TAMPA, FL 33623

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN E. JOHNSON, AUTHORIZED REPRESENTATIVE AR 11/13/2008

Electronic Signature of Signing Officer or Director Date