

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000089722

FILED
May 29, 2004
Secretary of State

Entity Name: TOTAL CONCRETE SERVICES, INC.

Current Principal Place of Business:

9425 ALVERNON DR
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

6509 NAUTICAL ISLE
HUDSON, FL 34667

Current Mailing Address:

6509 NAUTICAL ISLE
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-3478256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENSLEY, DAVID W
6509 NAUTICAL ISLE
HUDSON, FL 34667 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENSLEY, TODD H
Address: 9425 ALVERNON DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ST () Delete
Name: HENSLEY, DAVID W
Address: 6509 NAUTICAL ISLE
City-St-Zip: HUDSON, FL 34667

Title: V () Delete
Name: FOWLER, ROBERT
Address: 2759 TERRACE DR N
City-St-Zip: CLEARWATER, FL 34619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENSLEY, TODD H
Address: 7421 ASHWOOD DR
City-St-Zip: PORT RICHEY, FL 34668

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 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 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: DAVID W HENSLEY

ST

05/29/2004

Electronic Signature of Signing Officer or Director

Date