SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SE30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO $750).

FILED
Sep 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT
Sandra B. Mc
Secretary of
DIVISION OF CORPS

DOCUMENT # P97000098508 (9)

1. Corporation Name

CONCRETE RESTORATION SPECIALIST, INC.

Principal Place of Business	Mailing Address
308 SOUTH HAMPTON JUPITER FL 33458	308 SOUTH HAMPTON JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 916 9th CT.	26 916 9th CT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Palm Beach Gardens	27 Palm Beach Gar
City & State	City & State
23 FL.	28 FL.
Zip 24 33410 — Country 25 US	Zip 29 33410 — C 30

3. Date Incorporated or Qualified: 11/19/1997

4. FEI Number: 65-0796509 — ☐ Applied For ☐ Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

LEWIS, JOHN C SR
308 SOUTH HAMPTON
JUPITER FL 33458

10. Name and Address of New Registered Agent

Name [redacted]

Street Address (P.O. Box Number Is Not Acceptable) [redacted]

City [redacted] FL 85 Zip Code ~~33410~~

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LEWIS, JOHN C SR	
STREET ADDRESS	308 SOUTH HAMPTON	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	VD	☐ DELETE
NAME	LEWIS, JOHN C JR	
STREET ADDRESS	308 SOUTH HAMPTON	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (5/98)

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 on an attachment with an address.

SIGNATURE: John C. Lewis JOHN C. LEWIS 8/26/98 561-642-9138 561-386-0424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER