2002 UNIFORM BUSINESS REPORT (UBR)

May 28, 2002 8:00 am Secretary of State DOCUMENT # P97000108264 1. Entity Name 05-28-2002 91523 003 ***150 00 G & S CONCRETE, INC. Principal Place of Business Mailing Address 3205 TANGLEWOOD DR. 3205 TANGLEWOOD DR. SARASOTA FL 34239 SARASOTA FL 34239 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3489991 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VASTOLA. SAL Street Address (P.O. Box Number is Not Acceptable) 3205 TANGLEWOOD DR. SARASOTA FL 34239 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE Delete ☐ Change Addition NAME vastola, gloria STREET ADDRESS 3205 TANGLEWOOD DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 ☐ Delete TITLE VΡ TITLE [] Change Addition NAME NAME vastola. Sal STREET ADDRESS 3205 TANGLEWOOD DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

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

5-2-02 941-925-8665
Date Daytime Phone #

FILED

434798 Attachment + P97000108264 To Whom It May Corcera, 5-2-02 in the mail today. I apolyging In any inconvenience that this may cause. That you for your productionaling. Hue Mitale

Hr S. Correto, Vac.

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