FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P98000040854

Principal Place of Business

CONCRETE CONSTRUCTORS, INC.

6216 HUNTERS MILTON FL 325			6216 HUNTERS RIDGE DR. MILTON FL 32570			DO NOT WR	DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualifed 05/04/1998 				
2. Principal Pl	ace of Business	2a	Mailing Address			4. FEI Number		_ _	Applied For	
21		26				59-353/825			Not Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			5. Certifcate of Status Desired			5 Additional Required	
City & State			City & State					May Be		
Zip	Country	28 Country Zip Country 25 29 30			i	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ►No				
<u> </u>	9. Name and Address of Curre			<u> </u>		10. Name and Address of New	Registered A	gent		
			*	81	Name					
YERBY, BRIAN 6216 HUNTERS RIDGE DR.					2 Street Address (P.O. Box Number is Not Acceptable)					
MILT	ON FL 32570			83			-			
				84	City			85 Zi	ip Code	
					L	corporation submits this statement for the	<u> </u>			
SIGNATURE	Signature, typed or printed name of registered age			egistered Age	nt signature	required when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIREC	TORS IN 12	
TITLE				1.1 TITLE		P/C		☐ Chang	ge 🖾 Addition	
NAME				1.2 NAME		BRIAN D. YERBY SR.			ł	
STREET ADDRESS				1.3 STREE	TADDRESS	BRIAN D. YERBY SR. 6216 HUNTERS RIDGE DR.				
CITY-ST-ZIP				1.4 CITY- S	T-ZIP	MILTON FL. 32570			-	
TITLE			☐ DELETE	2.1 TITLE		ulele in		Chang	ge Addition	
NAME				2.2 NAME		CHRISTINE R. YERBY 6216 HUNTERS RIDGE I				
STREET ADDRESS				2.3 STREE	T ADORESS	6216 HUNTERS RIDGE L	DR.			
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP	MILTON, FL. 32570				
TITLE			☐ DELETE	3.1 TITLE				Chang	ge 🔲 Addition	
NAME				3.2 NAME					İ	
STREET ADDRESS				3.3 STREE	T ADDRESS					
CITY-ST-ZIP				3.4. CITY-	ST-ZIP					
TITLE			☐ DELETE	4.1 TITLE			2	Chang	ge	
NAME				4. 2 NAME					ļ	
STREET ADDRESS				4.3 STREE	TADORESS				Ì	
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP					
TITLE			☐ DELETE	5.1 TITLE				☐ Chang	ge 🔲 Addition	
NAME				5.2 NAME					1	
STREET ADDRESS					TADDRESS				1	
CITY-ST-ZIP				5.4 CITY-5	ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE				Chang	ge	
NAME				6.2 NAME						
OTDEET ADDRESS				■ 6.3 STREE	TADDRESS					

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90007 032 ***150.00