2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 02, 2004 08:00 AM DOCUMENT # P98000071048 **Secretary of State** 1. Entity Name SUN STATE CONCRETE, INC. Principal Place of Business Mailing Address 6215 45TH AVENUE DRIVE EAST 6215 45TH AVENUE DRIVE EAST BRADENTON FL 34203 BRADENTON FL 34203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0855134 Not Applicable Zin Country Ζŧρ 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 BEN COOPER & ASSOCIATES INC Street Address (P.O. Box Number is Not Acceptable) 3909 E BAY DR STE 1101 HOLMES BEACH FL 34217 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. I am familiar with, and accept the obligations of registered agent. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPST TITLE Delete TITLE Change Addition NAME GILEY, HOWARD JR NAME STREET ADDRESS 6215 45TH AVENUE DRIVE EAST STREET ADDRESS U00000028793 02/04/04-80040-004 150.00 CITY - ST - ZIP **BRADENTON FL 34203** CITY-ST-ZIP 33315 Defete T133 F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-719 CITY-ST-ZIP HILE Delete 3333 Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TETLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DBF Delete TITLE ☐ Change Addition NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-73P CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

FILED