FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90287 042 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000097267

ALL ASPECTS CONCRETE, INC.

Principal Place	of Business	Mailing Address			1 10011000 110 10161 10111 10111	MATERIA MATERIA	#1 1 <b>00</b> 10 11010 1	#1(1) (##1 1##1
5632 DAVIS RD		5632 DAVIS RD						
LAKELAND FL 33810		LAKELAND FL 33810			DO NOT WRITE IN THIS SPACE			
							PACE	
ı				1	<ol> <li>Date Incorporated or Qualife</li> <li>11/16/1998</li> </ol>	<i>:</i> a		1
		2s. Mailing Address			4. FEI Number		Π	olied For
<b>—</b>	ace of Business	2a. Mailing Address			59-35561	180		Applicable
21	н	Suite, Apt. #, etc.				<u> </u>	\$8.75 A	
Suite, Apt.	#, etc.	27			5. Certifcate of Status Desired		Fee Re:	
City & Stat		City & State	<del></del>		6. Election Campaign Financin	<u> </u>	\$5.00	May Be
		28			Trust Fund Contribution	• 🗆	Added to	
Zip Zip	Country	Zip	Country		8. This corporation owes the co	urrent vear Intar	ngible	
24	25	— · ·	30		Personal Property Tax.		∐ Yes	ZNo
	9. Name and Address of Curre	. <del></del>			10. Name and Address of Nev	v Registered A	gent	
			81 Na	ime .	.` ^ !! ! }	) ') -		
POT	ts, lizbeth		99 64-	<u>-&gt;}Y</u>	VIA MICHAIC W	hitens	<u> </u>	
7125	WRENWOOD CIR		82 Str	こくシン	Davis Road	plable)		
TAM	PA FL 33617		83	1 6:20x				
ļ							T1 =: 6	<u></u>
			84 Cit	٠٧. ال	1000	F:L	85 Zip Ci	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
11 Purevant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statute	s, the above-nan	med corpor	ation submits this statement for t	he purpose of c	hanging its	registered
office or r	opictored appent or both in the State	af Florida. Such change was at	ithorized by the C	corporation'	s board of directors. I hereby acr	cept the appoint	ment as reg	jistered
agent la	m familiar with, and accept the oblig			11. 1	3) 3) 1			
SIGNATURE	Signature, typed or printed riame of registered ago		Registered Agent signa	ature required w	then reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO C	OFFICERS AND	DIRECTO	
TITLE		☐ DELETE	1.1 TITLE	7		1	☐ Change	Addition
NAME			1.2 NAME	Bo	bby R. Whitel	rend;		
STREET ADDRESS			1.3 STREET ADDR	RESS LOF	710 Shermuse	ROCK		
CITY-ST-ZIP			1.4 CITY-ST-ZIP	المرا	Keland Flori	da 33	3810	
TITLE		☐ DELETE	2.1 TITLE `	- V/C	2		☐ Change	Addition
NAME			2.2 NAME	Dol	hald Wayne W	Mitelaca	-9	
STREET ADDF ESS			2.3 STREET ADDR	1	32 Davis Road			
CITY-ST-ZIP	!		2.4 CITY-ST-ZIP		Koland Floria	إم ع	810	_
TITLE		☐ DELETE	3.1 TITLE		15/m		Change	Addition
NAME			3.2 NAME	1 -	michelle whi	talla si		
STREET ADDI ESS			3.3 STREET ADDR					
CITY-ST-ZIP			3.4. CITY-ST-ZIP	. T	632 Davis Rom	3:	3810	
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME			4 2 NAME					
STREET ADDF ESS			4.3 STREET ADDR	RESS				
İ			44 CITY-ST-ZIP	1				
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition
			5.2 NAME					
NAME			5.3 STREET ADDR	RESS				
STREET ADDITESS			5.4 CITY-ST-ZIP					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		<del></del>	<del></del>	☐ Change	Addition
TITLE		_ 022210	6.2 NAME				_ •	
NAME			6.3 STREET ADDR	RESS				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 tipe empowered.

SIGNATURE:

941-859-3618