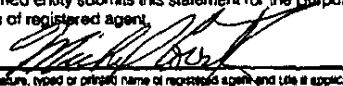
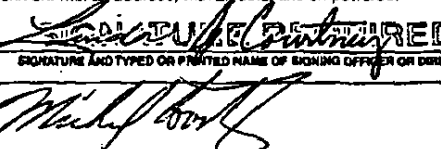


FILED
Jul 28, 2003 8:00 am
Secretary of State

05-05-2003 91423 044 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000000417			
1. Entity Name CARAWAY CONCRETE EQUIPMENT, INC.			
Principal Place of Business 3206 N. TANNER RD. ORLANDO FL 32826		Mailing Address 3206 N. TANNER RD. ORLANDO FL 32826	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip Country	
4. FEI Number 59-3558081		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOWDA, DAMON Michael COURTNEY 3206 N. TANNER RD. ORLANDO FL 32826			
7. Name and Address of New Registered Agent Michael COURTNEY Street Address (P.O. Box Number is Not Acceptable) 3206 N. Tanner Rd City Orl, Fl. FL Zip Code 32826			
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. SIGNATURE  DATE 3-26-03 (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DOWDA, DAMON P.O. BOX 878485 (N/A) ORLANDO FL 32887 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COURTNEY, MICHAEL 3206 N TANNER RD ORLANDO FL 32826 ☒ Delete	TITLE PRES NAME Courtney, Michael STREET ADDRESS 3206 N. Tanner Rd. CITY-ST-ZIP Orlando, FL 32826	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS COURTNEY, LINDA 3206 N TANNER RD ORLANDO FL 32826 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  Michael Courtney		3/26/03 407-380-5959 Date Daytime Phone #	