2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 03, 2000 8:00 am DOCUMENT # **P99000035913 Secretary of State** M & J CONCRETE PUMPING INC. 03-03-2000 90225 032 ***150.00 Principal Place of Business Mailing Address 20936 SW 122ND PLACE 20936 SW 122ND PLACE MIAMI FL 33177-5742 MIAMI FL 33177 2. Principal Place of Business 3. Mailing Address DO NOT-WRITE-IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GONZALEZ, JORGE Street Address (P.O. Box Number is Not Acceptable) 20936 SW 122ND PLACE MIAMI FL 33177 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE.IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition PTD Change TITLE □ Delete GONZALEZ, JORGE NAME NAME STREET ADDRESS 20936 SW 122ND PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 ☐ Addition ₃SVD,⊳∍, ☐ Delete ☐ Change TITLE GONZALEZ, MARGARITA NAME NAME NAME STREET ADDRESS 20936 SW, 122ND PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME

13. 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 of 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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

Delete.

2-24-00 305-252 Date 0 Daytime Phone #

☐ Change

☐ Addition