

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 31, 2000 8:00 am
Secretary of State

08-31-2000 90111 020 ***158.75

DOCUMENT # P99000037085

1. Entity Name
T2T CONCRETE INCORPORATED

Principal Place of Business
**3600 E PERRY ST
 INVERNESS FL 34453**

Mailing Address
**3600 E PERRY ST
 INVERNESS FL 34453**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0915385

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ENO, JON
 3600 E PERRY ST
 INVERNESS FL 34453**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	ENO, DANIEL	
STREET ADDRESS	4090 E PERRY ST	
CITY-ST-ZIP	INVERNESS FL 34453	
TITLE	D	<input type="checkbox"/> Delete
NAME	ENO, JON	
STREET ADDRESS	3600 E PERRY ST	
CITY-ST-ZIP	INVERNESS FL 34453	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

07/12/00

352-726-5133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

P99 000037085

B0104905

7/07/00 CORPORATE DETAIL RECORD SCREEN 12:35 PM
NUM: P99000037085 ST:FL ACTIVE/FL PROFIT FLD: 04/23/1999
NAME : T2T CONCRETE INCORPORATED
PRINCIPAL: 3600 E PERRY ST
ADDRESS : INVERNESS, FL 34453
RA NAME : ENO, JON
RA ADDR : 3600 E PERRY ST
INVERNESS, FL 34453
ANN REP : * NONE FILED *

7/07/00 OFFICER/DIRECTOR DETAIL SCREEN 12:35 PM
CORP NUMBER: P99000037085 CORP NAME: T2T CONCRETE INCORPORATED
TITLE: D NAME: ENO, DANIEL
4090 E PERRY ST
INVERNESS, FL 34453
TITLE: D NAME: ENO, JON
3600 E PERRY ST
INVERNESS, FL 34453

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----

Attachment

P99000037085