

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90064 040 ***150.00

DOCUMENT # P99000100435

1. Entity Name
BRYAN'S CONCRETE, INC.



Principal Place of Business
**6747 LONG MEADOW CIRCLE S.
JACKSONVILLE FL 32244**

Mailing Address
**P.O. BOX 330
MIDDLEBURG FL 32050**



2. Principal Place of Business

7756 PEPPER CIRCLE EAST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JACKSONVILLE, FL

City & State

4. FEI Number

59-3607503

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RASCOT, MIRANDA

6747 LONG MEADOW CIRCLE S.

JACKSONVILLE FL 32244

7. Name and Address of New Registered Agent

Name

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

7756 PEPPER CIRCLE EAST

City

JACKSONVILLE

FL

Zip Code

32244

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

MIRANDA RASCOT, PRES.

3/12/03

DATE

(NOTE: Registered Agent signature required when reinstating)

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

TITLE **P** ☐ Delete
NAME **RASCOT, MIRANDA**
STREET ADDRESS **6747 LONG MEADOW CIRCLE S.**
CITY-ST-ZIP **JACKSONVILLE FL 32244**

TITLE **VP** ☐ Delete
NAME **RASCOT, BRYAN**
STREET ADDRESS **6747 LONG MEADOW CIRCLE S.**
CITY-ST-ZIP **JACKSONVILLE FL 32244**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **7756 PEPPER CIRCLE EAST**
CITY-ST-ZIP **JACKSONVILLE, FL 32244**

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CITY-ST-ZIP

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: *Miranda Rascot* **MIRANDA RASCOT** **3/12/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)