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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$29246

(3)

ROD'S CONCRETE SERVICES, INC.

FILED Mar 19 1998 8:00am Secretary of State



Principal Piaco of Rusingss Maduse Address		h to to a state of					
Principal Place of Business Mading Address							
2186 SE ELMHURST ROAD PORT ST. LUCIE FL 34952		2186 SE ELMHURST RO: PORT ST. LUÇIE FL 349			1		
		TOTAL OF EQUIL 12 043	~-		DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified 02/01/1991		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied Fo	
1		[26]			65-0244823	Not Applic	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Additions Fee Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζφ	Country		8. This corporation owes or has paid the cur	rent year Intangible	
24	25	29	30			Yes No	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered	Agent	
	INE, ROD J.		81	Name			
	6 SE ELMHURST RD.		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
PO	RT ST. LUCIE FL 34952		83			· · · · · · · · · · · · · · · · · · ·	
			83				
			84	City	2 -1	85 Zip Code	
22 0	ETRITETTETTETTÜ A. TE 1. 224 A.	AN II I ANN 18 AN II II II II I			FL		
office or r agent I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida, Such change was gations of, Section 607,0505, FI	authorized by orida Statutes	the corpora	poration submits this statement for the purpose of ation's board of directors. I hereby accept the app	ointment as register	
SIGNATURE	Signature, typed or printed harne of registered ay	nest end title if enoiseable (NC)	F Registered Ans	nt signatura renu	ulred when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	P	DELETE	1.1 TITLE			Change Add	
NAME	MAINE, ROD J.		1.2 NAME	1			
STREET ADDRESS	2186 S.E. ELMHURST ROAD		1.3 STREET	ADDRESS			
CITY-S1-ZIP	PORT ST. LUCIE FL 34952-4	1935	1.4 CITY - S	T-ZIP			
TITLE	VS	DELETE	21 TITLE			Change Add	
NAME	MAINE, KAY A.		2.2 NAME				
STREET ADDRESS	2186 S.E. ELMHURST ROAD		23 STREET	ADDRESS			
CITY-ST-ZIP	PORT ST. LUCIE FL 34952-4		2 4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE]		☐ Change ☐ Add	
NAME			3 2 NAME	1			
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP			3 4. CITY - S	ST - ZIP			
TITLE			_				
		DELETE	4 1 TITLE	ļ		Change Add	
		☐ DELETE	4 2 NAME			Change Add	
STREET ADDRESS		DELETE	4 2 NAME 4 3 STREET			Change Add	
STREET ADDRESS City-St-Zip			4 2 NAME 4 3 STREET 4 4 CHY-S		annon tri di Vinderno di con formi di di dicono con Malaina di codi di con lo di VINNA di contra di cali col di	•	
STREET ADDRESS City-St-Zip Title		DELETE	4 2 NAME 43 STREET 44 CHY-S 51 TITLE			Change Add	
STREET ADDRESS CITY-ST-ZIP TITLE NAME			4 2 NAME 43 STREET 44 CITY-S 51 TITLE 52 NAME	T-ZIP		•	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			4 2 NAME 43 STREET 44 CITY-S 51 TITLE 52 NAME 53 STREET	T - ZIP		•	
STREET ADDAESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	4 2 NAME 43 STREET 44 CITY-S 51 TITLE 52 NAME 53 STREET 5.4 CITY-S	T - ZIP		☐ Change ☐ Add	
NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE			4 2 NAME 4 3 STREET 4 4 CITY-S 5 1 TITLE 5 2 NAME 5 3 STREET 5 4 CITY-S 6 1 TITLE	T - ZIP		•	
STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME		DELETE	4 2 NAME 43 STREET 44 CHY-S 51 TITLE 52 NAME 53 STREET 54 CHY-S 61 TITLE 62 NAME	T - ZIP ADDRESS T - ZIP		☐ Change ☐ Add	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	4 2 NAME 4 3 STREET 4 4 CITY-S 5 1 TITLE 5 2 NAME 5 3 STREET 5 4 CITY-S 6 1 TITLE	T-ZIP ADDRESS T-ZIP ADDRESS		☐ Change ☐ Add	

4. Fereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or suppliemental 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.

SIGNATURE:

Kay a Maine

3-10-98

3379995