2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90090 024 ***150.00

DOCUMENT # SB2164

951454

1. Entity Name
PRESTRESS CONCRETE, INC.

Principal Place of Business
~~11905 N.W. 102nd Rd.~~
~~Medley, FL 33178~~

Mailing Address
~~11905 N.W. 102nd Rd.~~
~~Medley, FL 33178~~

2. Principal Place of Business
2900 W. 84th Street
Suite, Apt. #, etc.
#106
City & State
Hialeah, FL
Zip 33018 Country USA

3. Mailing Address
2900 W. 84th Street
Suite, Apt. #, etc.
#106
City & State
Hialeah, FL
Zip 33018 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0250212
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
~~Damsky, Gerald~~
~~1395 Brickell Ave~~
~~3rd Floor~~
~~Miami, FL 33131~~

7. Name and Address of New Registered Agent
Name
Gerald Damsky, P.A.
Street Address (P.O. Box Number is Not Acceptable)
621 N.W. 53rd Street #365
City Boca Raton FL Zip Code 33487

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 Gerald Damsky, P.A., by Gerald Damsky, President 4/24/00
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 $150.00
After MAY 1, 2000 Fee will be $550.00
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	PD	☐ Delete	TITLE	PD	☒ Change ☐ Addition
NAME	~~ALVAREZ, WALTER~~		NAME	ALVAREZ, WALTER	
STREET ADDRESS	~~11905 NW 102nd RD~~		STREET ADDRESS	2900 W. 84th STREET #106	
CITY-ST-ZIP	~~MEDLEY, FL~~		CITY-ST-ZIP	HIALEAH, FL 33018	
TITLE	STD	☐ Delete	TITLE	STD	☒ Change ☐ Addition
NAME	~~ALVAREZ, MABEL~~		NAME	ALVAREZ, MABEL	
STREET ADDRESS	~~11905 NW 102nd RD~~		STREET ADDRESS	2900 W. 84th STREET #106	
CITY-ST-ZIP	~~MEDLEY, FL~~		CITY-ST-ZIP	HIALEAH, FL 33018	
TITLE	V	☐ Delete	TITLE	V	☒ Change ☐ Addition
NAME	~~VILLASUSO, LESLIE~~		NAME	VILLASUSO, LESLIE	
STREET ADDRESS	~~11905 NW 102nd RD~~		STREET ADDRESS	2900 W. 84th STREET #106	
CITY-ST-ZIP	~~MEDLEY, FL~~		CITY-ST-ZIP	HIALEAH, FL 33018	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption pursuant to 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 electronic 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 my address, with all other like empowered.

IMPORTANT

SIGNATURE: Walter Alvarez, President 4/24/00 (305) 558-3515