2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

V51592 **DOCUMENT #**

1. Entity Name

C & C CONCRETE INC.



FILED Feb 27, 2003 8:00 am Secretary of State 02-27-2003 90177 017 ***150.00

Principal Place of Business 10 N. FIRST CT. WINTER SPRINGS FL 32708 US			Mailing Address 10 N. FIRST CT. WINTER SPRINGS FL 32708 US				10028264				
2. Principal F	Place of Busin	ess	3. Mailing Address				. 1 10017 011601 01161 17007 01110 181			81866 B1846 1 88 5	
Suite, Apt	. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Sta	te	_	City & State			4.	FEI Number 59-3133019		———	pplied For ot Applicable	
Zip Country			Zip	Zip Country			Certificate of Status Desired		8.75 Ad	ditional	
	6. Name	and Address of Current	Registered Agent	egistered Agent			7. Name and Address of New Registered Agent				
					Name		The same readings of their the	gioterea	yem.		
CHIN, CE	SAR A										
10 N. FIR		÷		Street Address			s (P.O. Box Number is Not Acceptable)				
WINTER :	springs fl	. 32708									
		*		City			FL	Zip Coo	le		
8. The above	named entity	submits this statement for	or the purpose of changing it	s register	ed office or re	egistered ad	gent or both in the State of Flor	ida Jamifa	miliar with	and accept	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
F	ILE NOW!!	FEE IS \$150.00				•					
		3∜Fee will be \$550:00°					9. Election Campaign Fina	ncing		10 Ма́у Ве	
		Florida Department o			ر چې د چې	المناوعة والمناسب	Trust Fund Contribution	. Ц	Added	to Fees	
10.	*	OFFICERS AND	DIRECTORS	11.		A [DDITIONS (CHANGES TO OFFIC	SEDO AND	DIDECTOR	0.151.4	
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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:

Date

Daytime Phone #