

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

FILED

**May 13 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000005094 (6)

1. Corporation Name
MASTEC TECHNOLOGIES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**3155 NW 77TH AVE
MIAMI FL 33122
US**

Mailing Address
**3155 NW 77TH AVE
MIAMI FL 33122
US**

3. Date Incorporated or Qualified
10/19/1995

4. FEI Number
65-0599178

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DC	<input type="checkbox"/> DELETE	11 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MAS, JORGE		12 NAME	
STREET ADDRESS 8600 NW 36TH ST.		13 STREET ADDRESS 3155 NW 77th Ave.	
CITY-ST-ZIP MIAMI FL 33166		14 CITY-ST-ZIP Miami FL 33122	
TITLE P	<input type="checkbox"/> DELETE	21 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MAS, RAMON		22 NAME	
STREET ADDRESS 8600 NW 36TH ST.		23 STREET ADDRESS 3155 N.W. 77th Ave.	
CITY-ST-ZIP MIAMI FL 33166		24 CITY-ST-ZIP Miami FL 33122	
TITLE VD	<input type="checkbox"/> DELETE	31 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME PERERA, ISMAEL		32 NAME Vice President	
STREET ADDRESS 8600 NW 36TH ST.		33 STREET ADDRESS 3155 N.W. 77th Avenue.	
CITY-ST-ZIP MIAMI FL 33166		34 CITY-ST-ZIP Miami FL 33122	
TITLE VTD	<input type="checkbox"/> DELETE	41 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME VALDES, CARLOS A		42 NAME Vice President	
STREET ADDRESS 8600 NW 36TH ST.		43 STREET ADDRESS 3155 N.W. 77th Ave.	
CITY-ST-ZIP MIAMI FL 33166		44 CITY-ST-ZIP Miami FL 33122	
TITLE S	<input checked="" type="checkbox"/> DELETE	51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME SARIEGO, JOSE M		52 NAME	
STREET ADDRESS 8600 NW 36TH ST.		53 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33166		54 CITY-ST-ZIP	
TITLE S	<input type="checkbox"/> DELETE	61 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME DAMON, NANCY J		62 NAME Nancy J Damon	
STREET ADDRESS 8600 NW 36TH ST.		63 STREET ADDRESS 3155 N.W. 77th Avenue	
CITY-ST-ZIP MIAMI FL 33166		64 CITY-ST-ZIP Miami FL 33122	

14. 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 annual report or supplemental 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: *Nancy J Damon* **Nancy J Damon 4-17-98 (205) 599-1800**

CR2E034 (10/97)