2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109205

Entity Name: ROBERTSON EXCAVATING, INC.

FILED Apr 30, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--|--|---|---|---|
| | ILAH DR. DRAL, FL 33993 | US | | |
| Current Mailing Address: | | | New Mailing Address | s: |
| | ILAH DR. DRAL, FL 33993 | US | | |
| FEI Numbe | r: 20-1401292 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | d Address of C | urrent Registered Agent: | Name and Address of | of New Registered Agent: |
| The above in the Stat | PRAL, FL 33993 e named entity s te of Florida. | | ourpose of changing its registere | d office or registered agent, or both, |
| SIGNATU | | c Signature of Registered Ag | | Data |
| Election Ca | | Trust Fund Contribution (). | ent | Date |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: | 5 () | | | ES TO OFFICERS AND DIRECTORS |
| Name: Address: | ROBERTSON, C 3217 DELILAH D | DR. | Title: Name: Address: City-St-Zip: | ES TO OFFICERS AND DIRECTORS () Change () Addition |
| Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: | ROBERTSON, C 3217 DELILAH E CAPE CORAL, F | HRISTOPER DR. EL 33993 US Delete RYSTAL DR. | Name: Address: | |
| Name: Address: City-St-Zip: Title: Name: Address: | ROBERTSON, C 3217 DELILAH E CAPE CORAL, F VP () ROBERTSON, C 3217 DELILAH E CAPE CORAL, F S () ROBERTSON, C 3217 DELILAH E | HRISTOPER DR. EL 33993 US Delete ERYSTAL DR. EL 33993 US Delete ERYSTAL | Name: Address: City-St-Zip: Title: Name: Address: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRYSTAL ROBERTSON VP 04/30/2008