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SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: MACROS CONSTRUCTION AND SERVICES, Inc. Name of Corporation		
DOCUMENT NUMBER: P07000098423		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CARLOS MACHADO Name of Contact Person		
Name of Contact Person		
MACROS CONSTRUCTION AND SERVICES, Inc.		
1869 NW 72nd WAY		
Address		
PEMBROKE PINES FL 33024 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
CARLOS MACHADO at (954) 632-9877 Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
1. The name of the corporation: MACROS CONSTRUCTION AND SERVICES, Inc.
2. The principal office address: 1869 NW 72nJ WAY
PEMBROKE PINES, FL 33024
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/4/07 Document number: P07000098423
5. The name and street address of the current registered agent and registered office on file with the
CARIOS MACHANO
4948 TRADEWINDS YERR 3
FORT LAUDERDALE, FL 33312
Florida Department of State: (If resigned, enter resigned) CARLOS MACHANO 4948 TRADEWINDS TERR FORT LANDERDALE, FL 33312 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CARLOS MACHADO
1869 NW 72nd WAY P.O. Box NOT acceptable
P.O. Box NOT acceptable
PEMBROKE PINES, FL 33024
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
CARLOS MACHA-DO DIRECTOR Signature of an officer or director Printed or typed name and little
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has field in the first in writing of this change.
1/22/09
Signature of Registered Agent Date If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *