2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State 01-26-2007 90030 015 ***158.75 **DOCUMENT #615874** 1. Entity Name C & A ENGINEERS, INC. Mailing Address Principal Place of Business 10610 N.W. 27TH STREET 10610 N.W. 27TH STREET MIAMI, FL 33172 MIAMI, FL 33172 CR2E034 (11/05) 01232007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1941873 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARRENO, PABLO J. DO NOT WRITE 10610 N.W. 27TH STREET MIAMI, FL 33172 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE CARRENO, PABLO J NAME 10610 N.W. 27TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 TITLE CARRENO, MARGARITA L NAME STREET ADDRESS 10610 N.W. 27TH STREET MIAMI, FL 33172 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 tristsee 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

STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 26, 2007 8:00 am