

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # H11941</b> 1. Entity Name FLORIDA CITY ENGINEERING CONTRACTORS, INC.	
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Principal Place of Business 20200 S.W. 280 ST HOMESTEAD, FL 33031	Mailing Address 20200 S.W. 280 ST HOMESTEAD, FL 33031
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**DO NOT WRITE IN THIS SPACE**



02192008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2427541	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINS, ALEXANDRE  
 202 S.W. 280 ST  
 HOMESTEAD, FL 33031

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

U00000863598  
 04/03/08-80098-009 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MARTINS, ALEXANDRE 20200 S.W. 280 ST HOMESTEAD, FL 33031
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD MARTINS, ALZIRA 20200 S.W. 280 ST HOMESTEAD, FL 33031
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MARTINS, MICHAEL 20200 S.W. 280 ST HOMESTEAD, FL 33031
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MARTINS, ROBERT 20200 S.W. 280 ST HOMESTEAD, FL 33031
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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 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: *Alexandre Martins* 3/17/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #