2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 13, 2005 08:00 AN Secretary of State DOCUMENT # K31184 1. Entity Name CARRERE GENERAL CONTRACTORS, INC. Principal Place of Business Mailing Address 10305 US HWY ONE 10305 US HWY #1 HOBE SOUND, FL 33455 HOBE SOUND, FL 33455 US 01132005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0070781 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARRERE, EARNEST D. DO NOT WRITE 330 FAIRWAY N. JUPITER, FL 33469 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. arrere SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agen) signalure required when reinstaling) 9. Election Campaign Financing \$5.00 May Be H000000302930 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/13/05-80089-022 150.00 OFFICERS AND DIRECTORS 10. PD TITLE CARRERE, EARNEST D NAME STREET ADDRESS 330 FAIRWAY N. CITY-ST-ZIP TEQUESTA, FL 33469 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 antidress, with all other like empowered.

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytima Phone #