

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2005 8:00 am
Secretary of State

05-27-2005 90021 046 ***150.00

| | | | |
|---|---|---|---|
| DOCUMENT # P01000079303 1. Entity Name G.E. EXCAVATION, INC. | | | |
| Principal Place of Business 8181 NW S RIVER DR #229-B MEDLEY, FL 33166 US | | Mailing Address 8181 NW S RIVER DR #229-B MEDLEY, FL 33166 US | |
| 2. Principal Place of Business 531 E 37 STREET Suite, Apt. #, etc. | | 3. Mailing Address 531 E 37 STREET Suite, Apt. #, etc. | |
| City & State HIALEAH, FLORIDA Zip 33013 Country USA | | City & State HIALEAH, FLORIDA Zip 33013 Country USA | |
| 4. FEI Number 65-1128726 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent GUTIERREZ, GUILLERMO E 8181 NW S RIVER DR #229-B MEDLEY, FL 33166 | | 7. Name and Address of New Registered Agent Name GUTIERREZ, GUILLERMO E. Street Address (P.O. Box Number is Not Acceptable) 531 E 37 STREET City HIALEAH, FLORIDA FL Zip Code 33013 | |
| 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 <u><i>Guillermo E. Gutierrez</i></u> GUILLERMO GUTIERREZ 5/24/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | |
| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BUTIERREZ, GUILLERMO E 8181 NW S RIVER DR #229-B MEDLEY, FL 33166 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition GUTIERREZ, GUILLERMO E. 531 E 37 STREET HIALEAH, FLORIDA 33013 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered. | | | |
| SIGNATURE: <u><i>Guillermo E. Gutierrez</i></u> GUILLERMO E. GUTIERREZ 5/24/05 (305) 986-4661 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #</small> | | | |