FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 07, 2002 8:00 am Secretary of State

DOCUMENT # P01000096336 1. Entity Name					04-07-2002 90085 035 ***150.00				
ROCK CONSTRUCTION GROUP, INC.						I O O T O O			
DO NOT WRITE IN THIS SPACE									
2. Principal Place of Business 6624 S.W.136th CT. Suite. Apt. #, etc. 3. Mailing Address S A Suite. Apt. #, etc.			4 E			DO NOT WRITE IN THIS	SPACE		
777/778					4. FEI Number Applied For				
City & State MIAMI FLA		City & State		4. /	65-1148251		Not Applicable		
33 ¹ 38	Country U.S.A. Zip		Country	Country 5.		Certificate of Status Desired \$8.75 Additional Fee Required			
				Name>	7. Na	me and Address of Current Registere	ed Agent		
DO NOT WRITE									
IN THIS SPACE				Street Address	(P.O. B	tox Number is Not Acceptable)			
IN INIS SPACE									
		· · · · · · · · · · · · · · · · · · ·		City 		FI	L Zip (lode	
8. The above	named entity submits this statement for	the purpose of changing its	registered	office or registe	ered ag	ent, or both, in the State of Florida.			
SIGNATURE									
	Signature, typed or printed name of registered agent an			gent signature require	ert when re	DATE DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - May After May 1, Amended I Make Check Payable			1, Fee is 9 I UBR is 9	\$550.00 \$61.25	ate	Election Campaign Financing Trust Fund Contribution.		5.00 May Be ded to Fees	
11.	OFFICERS AND D	IRECTORS	TITLE						
TITLE NAME	President:								
STREET ADDRESS	Ernesto A.Rios 6624 S.W.136 Ct., Miami, F1.33183		STREET A	ADDRESS	•			·	
CITY-ST-ZIP TITLE	Vice-President, Secretary			- 211					
NAME	Reynaldo Orozco			, ,				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
STREET ADDRESS CHY-ST-ZIP	113/01 3.W.100 161.'LHallT'LT 331//			ADDRESS - ZIP		,			
11TLE			TITLE						
NAM I →STREET-ADORESS+			NAME :STREET:/	ADDRESS=	En large				
CHY-ST-ZIP	7-ZIP			- ZIP	DO NOT WRITE				
TITLE NAME.					IN THIS SPACE			1	
STREET ADDRESS			STREET A						
TITLE 3			TITLE	- 411					
NAME			NAME	*DDDECC					
STREET ADDRESS			STREET A						
TITLE			TITLE				•		
NAME STREET ADDRESS			NAME STREET A	ADDRESS					
CITY-ST-7IP			CITY-SI						

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

ME OF SIGNING OFFICER OR DIRECTOR

MARCH 27, 2002

(305) 382-5518

Daytime Phone #