## **FILED** 2005 FOR PROFIT CORPORATION Jan 27, 2005 08:00 AN ANNUAL REPORT **Secretary of State** DOCUMENT # P01000106868 1. Entity Name YANDI AND YADIR CONSTRUCTION, INC. Principal Place of Business Mailing Address 1113 NW 34TH AVE. 1113 NW 34TH AVE. MIAMI, FL 33125 MIAMI, FL 33125 No Chg-P 01252005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1150422 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ, ROLANDO DO NOT WRITE 1113 NW 34TH AVE. MIAMI, FL 33125 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 SIGNATURE me of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME RODRIGUEZ, ROLANDO U00000200350 01/28/05-80023-025 150.00 STREET ADDRESS 1113 NW 34TH AVE. CITY-ST-ZIP MIAMI, FL 33125 TITLE

DO NOT WRITE IN THIS SPACE

12. Thereby 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 attacpment with an address with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP THEF NAME STREET ADDRESS CITY-ST-ZIP TOTAL NAME STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #