2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 12, 2006 08:00 AM DOCUMENT # P01000106868 **Secretary of State** 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 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt #, etc. 01062006 CR2E034 (11/05) Cha-P City & State 4. FEI Number Applied For City & State Not Applicable 65-1150422 Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODRIGUEZ, ROLANDO Street Address (P.O. Box Number is Not Acceptable) 1113 NW 34TH AVE. MIAMI, FL 33125 City Zip Code FI 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. Land family ar with, and accept the obligations of registered agent SIGNATUR (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE Delete TITLE RODRIGUEZ, ROLANDO U00000383204 NAME NAME 1113 NW 34TH AVE. STREET ADDRESS STREET ADDRESS 01/12/06-80042-022 150.00 CITY-ST-7iP CITY-ST-ZIP MIAMI, FL 33125 ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete THIE Channe TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZiP

12. I hereby certify that the information supplied with this filling 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

PER CIT PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Davime Phone #

FILED