

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071478

**FILED**  
**Mar 20, 2006**  
**Secretary of State**

**Entity Name:** HURRICANE CONCRETE CUTTING & DRILLING INC.

**Current Principal Place of Business:**

PO BOX 770385  
MIAMI, FL 33177

**New Principal Place of Business:**

14234 SW 139 CT.  
MIAMI, FL 33186

**Current Mailing Address:**

PO BOX 770385  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 01-0730179

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHAW, RONALD K  
14301 SW 159 CT  
MIAMI, FL 33196 US

**Name and Address of New Registered Agent:**

SHAW, RONALD K  
14234 SW 139 CT.  
MIAMI, FL 33186 US

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.

**SIGNATURE:**

03/20/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** SHAW, RONALD K  
**Address:** 14301 SW 159 CT  
**City-St-Zip:** MIAMI, FL 33196

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** D (X) Change ( ) Addition  
**Name:** SHAW, RONALD K  
**Address:** 14234 SW 139 CT.  
**City-St-Zip:** MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** RONALD K. SHAW

PRES

03/20/2006

Electronic Signature of Signing Officer or Director

Date