2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 14, 2005 08:00 AM **DOCUMENT # P02000106345** Secretary of State GUERRERO ENGINEERING, INC. Principal Place of Business Mailing Address 2450 SW 137TH AVENUE 2450 SW 137TH AVENUE SUITE 234 SUITE 234 MIAMI, FL 33175 MIAMI, FL 33175 02092005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEi Number Applied For 52-2401796 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ, PETER M ESQ. DO NOT WRITE **2450 SW 137TH AVENUE SUITE 234** IN THIS SPACE MIAMI, FL 33175 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Un(mnn22974n \$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 02/15/05-80009-00S 300.00 10. OFFICERS AND DIRECTORS TITLE GUERRERO, FREDDY A NAME STREET ADDRESS 2450 SW 137TH AVENUE CITY-ST-ZIP MIAMI, FL 33175 TITLE NAME LEON, MARITZA V + STREET ADDRESS 2450 SW 137TH AVENUE CITY-ST-ZIP MIAMI, FL 33175 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED BY ANTIED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/05

Daylime Phone #

FILED