FILED Jan 31, 2006 08:00 AM Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

1. Entity Name DAMON'S CONCRETE CUTTING, INC.						
Principal Place 412 DATE PA LAKE WORTH	ALM DR	Mailing Address 412 DATE PALM DR LAKE WORTH, FL 33461 U	S			
DO NOT WRITE IN THIS SPACE				01172006 No Chg-P CR2E034 (11/05) 4. FEI Number 20-0379139 Applied For INot Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
412 DATE	6. Name and Address of Current R DAMON B PALM DR RTH, FL 33461		DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for ions of registered agent. Signature, typed or primed name of registered agent as		ed office or registe	,	·	am familiar with, and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0			.00 May Be		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DESCRIPTION OF CAPOZIO, DAMON B 412 DATE PALM DR LAKE WORTH, FL 33461	DIRECTORS				10556 0040-016 150.00
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRI	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				IN T	THIS SPAC	CE
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					-	
12. I hereby indicated of the co- changed	certify that the information supplied with I on this report or supplemental report is rporation or the receive r or truste e empo , or on an attachment with an address, v	this filling does not qualify for the extrue and accurate and that my signit wered to execute this report as requirith all other like empowered.	remptions containe ature shall have the aired by Chapter 60	d in Chapter 119, same legal effect 7, Florida Statutes	, Florida Statutes, I further tas if made under oath, the s; and that my name appe	r certify that the information lat I am an officer or director lars in Block 10 or Block 11 if