2006 FOR PROFIT CORPORATION **AMENDED ANNUAL REPORT**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # P04000013580 06 NOV 14 PM 3: 18 DI'GERARDO CONSTRUCTION CORP. Principal Place of Business Mailing Address 4882 NW 97 CT 4882 NW 97 CT DORAL, FL 33178 DORAL, FL 33178 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 11092006 Chg-P CR2E034 (11/05) Applied For City & State 4. FEI Number City & State 65-1214209 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUIZ, GERARDO Street Address (P.O. Box Number is Not Acceptable) 4882 NW 97 CT **DORAL, FL 33178** City Zip Code 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) DATE 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11 PD/D TITLE ☐ Delete TITLE ☐ Change Addition 200081770712 11/14/06--01068--006 **61 RUIZ, GERARDO NAME NAME STREET ADDRESS 4882 NW 97 CT STREET ADDRESS DORAL, FL 33178 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE VP Change XX Addition NAME NAME RUIZ, DIANA E. STREET ADDRESS STREET ADDRESS 18958 SW 307 STREET CITY-\$T-ZIP CITY-ST-ZIP HOMESTEAD, FL. 33030 TITLE Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUTY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing 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 eath; that I am an officer or director of the corporation or the receiver or trustee empewbed 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.

THE JOG .

NTED NAME OF BIGNING OFFICER OR DIRECTOR

SIGNATURE: X

GERARDO RUIZ, PRES. 11/09/06

Daytime Phone #