2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 27, 2008 08:00 AN **DOCUMENT # P04000019760 Secretary of State** BALBINO J CONSTRUCTION INC. Mailing Address Principal Place of Business 17700 SW 113 CT 17700 SW 113 CT MIAMI, FL 33157 MIAMI, FL 33157 03072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0680338 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent GUANDIQUE, BALBINO J DO NOT WRITE 17700 SW 113 CT MIAMI, FL 33157 IN THIS SPACE 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 Rorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent algorature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 U00000871921 04/10/08-80018-003 158.75 10. OFFICERS AND DIRECTORS TITLE **GUANDIQUE, BALBINO J** NAME 17700 SW 113 CT STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 TITLE \$158 75 **GUANDIQUE, JOSE T** NAME STREET ADDRESS 17700 SW 113 CT CITY-ST-ZIP MIAM!, FL 33157 03/24/08 ΠLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby 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:

CITY-ST-ZIP

TOWN THE AND TOWN OR PROPERTY NAME OF PICKING OFFICER OF DIDECTOR

3124/02.

305-910-LL

FILED