2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000025339 FILED 1. Entity Name EDUARDO RODRIGUEZ CLEAR AND FILL INC. 06 HAR 14 PH 2: 25 Principal Place of Business Mailing Address SECKE I. 3600 POPLAR WAY 3600 POPLAR WAY NAPLES, FL 34112 NAPLES, FL 34112 2. Principal Place of Business 3160 Taunton Auc 3. Mailing Address 3180 TAUNTON Suite, Apt. #, etc. Suite, Apt. #, etc. 02272006 Chg-P CR2E034 (11/05) City & State Applied For City & State 4 FEI Number FL North FL Morth 90-0168622 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired 34286 Sarasu 19 SOLUSO Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent margarito Rodrigue Z RODRIGUEZ, ENRIQUE J Street Address (P.O. Box Number is Not Acceptable) 3180 TAUNTON AVE NORTH PORT, FL FL342-89 20397 El Rose 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 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61,25 Ø Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PVST Dresiden F Change Addition ☐ Delete TITI F TITI F Edvardo Rodriguez RODRIGUEZ, EDUARDO NAMÉ NAME STREET ADDRESS 3600 POPLAR WAY STREET ADDRESS 3180 TAUNTON AVE North port FL3 4286 CITY-ST-ZIP NAPLES, FL 34112 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME 200069959612 04/10/06--01061--018 **75.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete MLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE 吅止 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby 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. -1911 SIGNATURE: 2

EDUARDO RODVIBUCZ