Mar 06, 2006 8:00 am 2006 FOR PROFIT CORPORATION Secretary of State **ANNUAL REPORT** 03-06-2006 90010 008 ***150.00 DOCUMENT # P04000097877 IDG CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 10051 NW 32ND TERRACE 10051 NW 32ND TERRACE DORAL, FL 33172 DORAL, FL 33172 02232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 34-2002270 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.- Name and Address of Current Registered Agent **GUTIERREZ, ARIEL E** DO NOT WRITE 10051 NW 32ND TERRACE DORAL, FL 33172 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 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

\$5.00 May Be

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE -GUTIERREZ, ARIEL E NAME 10051 NW 32ND TERRACE STREET ADDRESS CITY-ST-ZIP DORAL, FL 33172 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 CITY-ST-ZIP

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 istrue 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 emptwered 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 arresidiess, with all other like empowered.

SIGNATURE:

SIGNATURE AN

NTED NAME OF SIGNING OFFICER OR DIRECTOR

MUCL E. GUTTONNEE 2

Date

555-854

FILED

Applied For

Not Applicable