2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P04000097877



FILED Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90417 046 ***150.00 01042007 Chg-P CR2E034 (12/06) 4. FEI Number Applied For 34-2002270 Not Applicable

IDG CONSTRUCTION COMPANY, INC Principal Place of Business Mailing Address 10253 NW 32ND TERRACE 8700 WEST FLAGLER STREET, SUITE 355 DORAL, FL 33172 MIAMI, FL 33174-6875 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 8700 West Flagler Street 8700 West Flagler Street Suite. Apt. #, etc. Suite, Apt. #, etc. 355 355 City & State City & State Miami, Florida Miami, Florida Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired И 33174 USA 33174 USA Fee Required: 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Ariel E Gutierrez GUTIERREZ, ARIEL E Street Address (P.O. Box Number is Not Acceptable) 8700 West Flagler Street 10051 NW 32ND TERRACE DORAL, FL 33172 Suite 355 Zip Code 33174 Miami 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. Ariel E Gutierrez, President 01/04/2007 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 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITE F Change Addition President NAME GUTIERREZ, ARIEL E Ariel E Gutierrez 10051 NW 32ND TERRACE STREET ADDRESS STREET ADDRESS 8700 West Flagler Street Suite 355 CITY-ST-ZIF DORAL, FL 33172 CITY-ST-ZIP Miami, Florida 33174 ☐ Delete ☐ 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-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete ☐ Addition THILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 supply of the corporation or the receiver eport 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 bempowered 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:

Ariel E Gutierrez, President RE AND TY O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/2007

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