2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 28, 2006 8:00 am Secretary of State DOCUMENT # P04000105669 03-28-2006 90130 009 ***150.00 MCCANDLISH CONSTRUCTION GROUP, INC. Principal Place of Business Mailing Address აასსხვნგ 40 NE 1ST AVENUE SUITE 504 40 NE 1ST AVENUE SUITE 504 MIAMI, FL 33132 MIAMI, FL 33132 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03242006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 20-1457825 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Terry D. McCandlish Street Address (P.O. Box Number is Not Acceptable) 8440 South Dixie Highway Apt. # 1010 Miami, Florida 33143 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. Efection Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change ☐ Addition NAME McCandlish, Terry D. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 8440 South Dixie Hwy. Apt. # 1010 TITLE Miami, Florida 33143 ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CDY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition TITLE 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 NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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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 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. TERRY D. Mª CANOLIST 3.25.06 SIGNATURE: