2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 02, 2007 8:00 am Secretary of State 04-02-2007 90100 012 ***159.75 DOCUMENT # P04000165109 DOUBLE EE CONCRETE CUTTING SERVICE INC 411141000 Principal Place of Business Mailing Address **575 NOBLES ROAD 575 NOBLES ROAD** LABELLE, FL 33935 LABELLE, FL 33935 03012007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1972704 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ARENIVAR, EDWIN A DO NOT WRITE **575 NOBLES ROAD** LABELLE, FL 33935 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. 1 am familiar with, and accept 3-22-07 (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ARENIVAR, EDWIN A NAME STREET ADDRESS 575 NOBLES ROAD CITY-ST-ZIP LABELLE, FL 33935 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-78P TITLE IN₃THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

A Aronivar

FILED