2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCU	MENT:	# P05000025		7		EU					
Entity Name THE INFRASTRUCTURE, INC.)	08 MAY -6	PM 2: 4	1		
							JECKÉTÁRY ALLAHASSE	OF STAT	TE.		
Principal Place of Business Mailing Address						17	ALLAHASSE	E, FLOR	IDA		
5617 MOSSY TOP WAY Tallahassee. Fl 32303			5617 MOSSY TOP WAY TALLAHASSEE, FL 32303								
INCOM MOSE	LL, IL 32300	,	INCOMINOSEC, IL SZ	.505							
3 Bringing D	Diana of Duning	Na DO Bay #	1 9 Mailton Addison								
2. Principal Place of Business - No P.O. Box # 3. Mailing Address					180028			II BOND NEDI ON	 	 	
Suite, Apt. #, etc.			Suite, Apt, #, etc			05062008	Chg-P	CR2E03	4 (12/06)		
City & State			City's Stole			<u></u>			<u> </u>	-0-15-	
City & State		City & State 37313		4. FEI Numb			_ 	plied For at Applicable			
Zip	ip Country		Zip Count		try	5. Certificate of Status Desired \$8.75 Additional					
ļ	6. Name and Address of Current Registers		1			Fee Required					
	o. Name	and Address of Current		7. Name and Address of New Registered Agent Name							
	I, NATALIE										
5617 MOSSY TOP WAY				Street Add			ss (P.O. Box Number is Not Acceptable)				
TALLAHASSÉE, FL 32303						•					
					City			FL	Zip Code	e	
g. The shows	n named antity	submits this statement for	or the purpose of changing it	to register	ad affice or regists	avad speed ov by	who in the Ctate of Ele		milios viith		
	tions of registe		or the purpose of changing if	is registeri	ed dilice or registe	ered agent, or ot	un, in the state of Fit	Jilua. Tallita	amıllar watrı,	апо ассері	
CICALATURE							•				
SIGNATURE.	Signature, typed o	r printed name of registered agent	and title if applicable (NC	TE: Registere	a Agent signature require	ed when reinstating)		DATE			
			9. Election Camp	oioo Fino	raina C.C		l				
1		FEE IS \$150.00 tember 12, 2008	Trust Fund Co			5.00 May Be Ided to Fees	In accordance of corporation did	with s. 607." not receive	193(2)(b), the prior r	F.S., the notice.	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICEBS AND I	DIDECTOR	C IN 11	
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MAME	SIMPSON,			NAM	E				_ ,		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	information or analysis with		CITY TITLE NAM STRE	-ST-ZIP E E EET ADDRESS -ST-ZIP	and in Chantar 11	O. Florido Characa				
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated	certify that the	or supplemental report i	h this filing does not qualify s true and accurate and that	CITY TITLE NAM STRE CITY for the exit my signa	-ST-ZIP E E ET ADDRESS -ST-ZIP emptions containe ture shall have the	same legal effe	ct as if made under	further certif	y that the ir	aformation or director	
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