## 2006 FOR PROFIT CORPORATION

## Feb 23, 2006 8:00 am **ANNUAL REPORT** Secretary of State DOCUMENT # P05000030474 02-23-2006 90007 002 \*\*\*150.00 AMERICAN INTERNATIONAL CONSTRUCTION GROUP CORP. Principal Place of Business Mailing Address 15771 SW 85 STREET 15771 SW 85 STREET MIAMI, FL 33193 MIAMI, FL 33193 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212006 CR2E034 (11/05) City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOMEZ, MARTA L Street Address (P.O. Box Number is Not Acceptable) 15771 SW 85 STREET MIAMI, FL 33193 Zip Code 8. The above pamed entity ubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. am familiar with, and accept the obligations of register ed agent. SIGNATURE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRES ☐ Delete TITLE TITLE ☐ Addition ☐ Change GOMEZ, MARTA L NAME NAME STREET ADDRESS 15771 SW 85 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33193 CITY+ST-ZiP TITLE Delete TITLE ☐ Change ☐ Addition NAME GOMEZ, WILFREDO NAME STREET ADDRESS 15771 SW 85 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33193 TITLE ☐ Delete TITLE □ Change ☐ Addition GOMEZ, ENGELS NAME NAME STREET ADDRESS 15571 SW 85 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33193 CITY-ST-ZIP Delete TITLE TREA TITLE ☐ Change ■ Addition ANDERSON, LEMMAR NAME STREET ADDRESS 15571 SW 85 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33193 TITLE DIR. ☐ Delete TITLE ☐ Change ☐ Addition ZELAYA, JONATHAN NAME NAME 15571 SW 85 STREET STREET ADDRESS STREET ADDRESS MIAMI, FL 33193 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information hat 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in address, with all other like empowered. 12. I hereby certify that the information indicated on this report or supplem of the corporation or the receiver or changed, or on an attachment with

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED