


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90081 031 ***150.00

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| DOCUMENT # P05000123048 |  |
| 1. Entity Name EASTERN ENGINEERING GROUP COMPANY | |

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| Principal Place of Business 10530 NW 26 ST SUITE F-102 MIAMI, FL 33172 | Mailing Address 10530 NW 26 ST SUITE F-102 MIAMI, FL 33172 |
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40009433

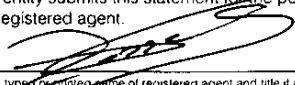


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| 2. Principal Place of Business - No P.O. Box # 2000 NW 89 PLACE | 3. Mailing Address 2000 NW 89 PLACE |
| Suite, Apt. #, etc. SUITE 102 | Suite, Apt. #, etc. SUITE 102 |
| City & State MIAMI FL | City & State MIAMI FL |
| Zip 33172 | Country USA |

01122007 Chg-P CR2E034 (12/06)

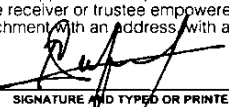
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| 6. Name and Address of Current Registered Agent TORRES, FERNANDO 14973 SW 22ND STREET MIAMI, FL 33185 | |
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| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | Zip Code |

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| 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  | FERNANDO TORRES (NOTE: Registered Agent signature required when reinstating) | 01-29-2007 DATE |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LOPEZ, RAISSA R 14973 SW 22ND STREET MIAMI, FL 33185 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D TORRES, FERNANDO 14973 SW 22ND STREET MIAMI, FL 33185 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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. | | |
| SIGNATURE:  | RAISSA R. LOPEZ, PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | 01-29-2007 Date |
| | | 305-599-8133 Daytime Phone # |