2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000135701

1. Entity Name
CYBORG CONSTRUCTION CORP.

Principal Place of Business	Mailing Address
360 W 62 STREET HIALEAH, FL 33012	360 W 62 STREET HIALEAH, FL 33012

DO NOT WRITE IN THIS SPACE

04292008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-3589721	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, RAMON
360 W 62 STREET
HIALEAH, FL 33012

**DO NOT WRITE
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. 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

**FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PS	
NAME	MARTINEZ, RAMON	
STREET ADDRESS	360 W 62 STREET	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE	V	
NAME	MARTINEZ, JUAN C V	
STREET ADDRESS	448 NW 113 DR	
CITY-ST-ZIP	OKECHOBEE, FL 34974	
TITLE	T	
NAME	MARTINEZ, RICARDO T	
STREET ADDRESS	8202 NW MIAMI CT J622	
CITY-ST-ZIP	MIAMI, FL 33150	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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05/29/08-80084-006 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____   4/28/08   305 481-2317
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #