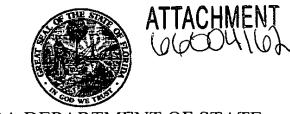
## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2006 8:00 am Secretary of State

2/1

DOCUMENT # P05000138379  1. Erriti'y Name BENCHMARK ESTIMATING SERVICES, INC.												)55 034 **	
Principal Place	e of Busines:	s	Mailing A	Mailing Address									
4554 PINE TREE DR DELRAY BEACH, FL 33445				4554 PINE TREE DR DELRAY BEACH, FL 33445				•					
2. Principal P	tace of Busin	3. Mailing	3. Malling Address										
Suite, Apt. #, etc.			Suite, A	Suite, Apt. #, etc.				02012006	С	hg-P	CR	2E034 (11/05)	•
City & State				City & State			4. FEI Number 20-37.			214	36	I i	opplied For lot Applicable
Zip	Country		Zip	Zîp		Country		5. Certificate	of Stat	us Desired		\$8.75 Ac Fee Requir	
	6. Name	and Address of Curre	nt Registered A	itered Agent		Name		7. Name and	Addre	ss of New	Register	ed Agent	
CANTIN, S 4554 PINE	TREE DE					Street Address (P.O. Box Number is Not Acceptable)							
DELRAY B	BEACH, FI												
										F	Zip Co	de	
	named entitions of regist	y submits this statemen	for the purpose	of changing its	register	ed office or reg	gistered	d agent, or bo	th, in th	e State of	Florida. 1	am lamiliar with	, and accept
SIGNATURE_	oci en rogia	acido agoria.											
SIGNA: UME_	Signature, typed	Or printed herne of registered ag	ent end tile å applicati	e (NOTE	Registere	O Agent signature rei	editted ay	hen (enstering)			DA	TE .	··
FIL After Ma	\$5.00 Added	0 May Be I to Fees											
10.	1	OFFICERS AN	ND DIRECTORS		11.			ADDITIONS	/CHAN	3ES TO O	FFICERS A	ND DIRECTOR	
TITLE NAME	PD CANTIN, STEPHANE				TITLE NAME							☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	1	E TREE DR BEACH, FL 33445		STRE									
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11TLE NAME	☐ Delete TITE					- 1						☐ Change	Addition
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NAME STREET ADORESS	ADORESS ST					E Et address							
CITY-ST-ZP			interest in the second			-ST-2IP		- Oh		- 0	4.4		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statures. 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 it made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execuse this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 ill changed, or on an attachment with an address, with all other like empowered.  SIGNATURE:  SIGNATU													r or director
SIGNAT	TURE:	SIGNATURE AND TYPED O	OR PRINTED NAME OF	SIGHING OFFICER	575 08 DBV.C1	offert	CA.	MIN	0	414/	06	561 542 Day Tie Phore I	<i>5785</i>



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2006

BENCHMARK ESTIMATING SERVICES, INC. 4554 PINE TREE DR DELRAY BEACH, FL 33445

Subject: BENCHMARK ESTIMATING SERVICES, INC.

Reference Number:

P05000138379

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION