2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005238

MASCOTTE, FL 34753 US

City-St-Zip:

Entity Name: MAGANA UNDERGROUND UTILITIES, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5084 PINE NEEDLE DR. MASCOTTE, FL 34753 US **Current Mailing Address: New Mailing Address:** 5084 PINE NEEDLE DR. MASCOTTE, FL 34753 US FEI Number: 20-4124996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MAGANA, ALEJANDRO 5084 PINÉ NEEDLE DR. US MASCOTTE, FL 34753 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MAGANA, ALEJANDRO Name: Name: 5084 PINE NEEDLE DR. Address: Address: City-St-Zip: MASCOTTE, FL 34753 US City-St-Zip: Title: VS D () Delete Title: () Change () Addition Name: MAGANA, GILBERTO Name: 5084 PINE NEEDLE DR. Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEJANDRO MAGANA PT D 04/20/2009