2008 FOR PROFIT CORPORATION

FILED AM te

ANNUAL REPORT					Jan 17, 2008 08:00			
	MENT # P06000155	456		,	S	ecretai	ry of Sta	
1. Entity Name DR. E. CONTRACTING, INC.								
Principal Place 2440 NW 63 #E	ce of Business 3 ST	Mailing Address 2440 NW 63 ST #E						
MIAMI, FL 3	3147	MIAMI, FL 33147						
		•)				
` C	O NOT WRITE	IN THIS SPA	CE	01092008	No Chg-P	CR2E034 (1	Applied For	
	•		•	20-807		□ \$8.7	Not Applicable 75 Additional	
				J. Certificate	3 Of Status Desired		Required	
	6. Name and Address of Current	Registered Agent						
BAILEY, R				DO	NOT W	RITE	F ()	
#E				IN '	THIS SP	ACE		
MIAMI, FL	. 33147					AOL	• • • • • • • • •	
8. The above	named entity submits this statement fo	r the purpose of changing its regist	ered office or register	red agent, or bo	oth, in the State of Flo	orida. I am famili	ar with, and accept	
	tions of registered agent.			-	•			
SIGNATURE.								
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regist	ered Agent signature required	d when reinstating)		DATE		
	.E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaign Fig. Trust Fund Contributio		.00 May Be led to Fees				
10.	OFFICERS AND	DIRECTORS			<u> </u>	,,,,		
TOLE	P							
NAME	BAILEY, RUSSELL			•				
STREET ADDRESS CITY-ST-ZIP	2440 NW 63 ST #E MIAMI, FL 33147							
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NAME	1							

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.

STREET ADDRESS CITY-ST-ZIP

OFFICER OR DIRECTOR