2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P98000032690 04-23-2007 90270 002 ***150.00 1. Entity Name MASTEC, INC. Principal Place of Business Mailing Address 800 S. DOUGLAS RD., 12TH FLOOR 800 S. DOUGLAS RD., 12TH FLOOR CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172007 Chg-P CR2E034 (12/06) City & State 4. FEI Number City & State Applied For 65-0829355 Not Applicable Zip -Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code FI 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 Delete TITLE TITLE Change ☐ Addition MAS, JOSE R DIR NAME NAME 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP TITLE PD ☐ Defete TITLE 🔀 Change ☐ Addition SHANFELTER, AUSTIN PRES ASJUGE RAMON NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS douglas RD, PENTHOUSE CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP TITLE ☐ Delete TITLE Change 🕽 ☐ Addition WAGMAN, STEVE TREA NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition LEWIS, J M SECR NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MYK, ANGELA VP NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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.

ANGELA MYK

NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED