## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTE LIAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P9900003070 04-23-2007 90280 017 \*\*\*150.00 1. Entity Name MASTEC BRAZIL I, INC. Principal Place of Business Mailing Address 4001~~-800 DOUGLAS ROAD, PENTHOUSE 800 DOUGLAS ROAD, PENTHOUSE 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 City & State 4. FEI Number Applied For 65-0890223 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code 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, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PESIDENT TITI F ☐ Defete TITLE K Change ☐ Addition MAS, JOSÉ RAMON 800 DOUGLAS RD, PENTHOUSE SHANFELTER, AUSTIN PRESID NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP TITLE SECR ☐ Delete TITLE ■ Addition ☐ Change LEWIS, J M SECRE NAME NAME STREET ADDRESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition WAGMAN, STEVE TREAS NAME NAME 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP Addition ☐ Defete TITLE TITLE Change MAS, JOSE R DIR NAME NAME STREET ADORESS 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME MYK, ANGELA VP 800 DOUGLAS ROAD, PENTHOUSE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

ANGELA MYK

FILED