

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000072222

FILED
Apr 30, 2009
Secretary of State

Entity Name: PRECAST ENGINEERING SYSTEMS, INC.

Current Principal Place of Business:

8911 REGENTS PARK DR., STE. 560
TAMPA, FL 33647

New Principal Place of Business:

19007 SILVERBROOK DRIVE
TAMPA, FL 33647

Current Mailing Address:

8911 REGENTS PARK DR., STE. 560
TAMPA, FL 33647

New Mailing Address:

19007 SILVERBROOK DRIVE
TAMPA, FL 33647

FEI Number: 59-3597420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGANA, RAFAEL
8911 REGENTS PARK DR., STE. 560
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

MAGANA, RAFAEL A PST
19007 SILVERBROOK DRIVE
TAMPA, FL 33647 US

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: RAFAEL MAGANA

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: MAGANA, RAFAEL A
Address: 8911 REGENTS PARK DR ST 560
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MAGANA, RAFAEL A PST
Address: 19007 SILVERBROOK DRIVE
City-St-Zip: TAMPA, FL 33647

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: RAFAEL MAGANA

PST

04/30/2009

Electronic Signature of Signing Officer or Director

Date