## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000092727**

1. Entity Name

M.E.C. CONSTRUCTION GROUP, INC.

FILED
Jan 17, 2006 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

7400 N.W. 7TH STREET SUITE 101 MIAMI, FL 33126 7400 N.W. 7TH STREET SUITE 101 MIAMI, FL 33126



DO NOT WRITE IN THIS SPACE

01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0963642 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALIL, EDUARDO A 9401 SW 35TH STREET MIAMI, FL 33165

DO	NOT	WRITE
IN	THIS	SPACE

		}						
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 1 am familiar with, and accept the obligations of registered agent.								
SIGNATURE Spriative, typed or position frame of requirement against and title (applicable) (INDTE: Registered Against signature required when reinstating)  DATE								
	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered A	required when reinstating)	DATE				
File NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		<ol> <li>Election Campaign Financial Trust Fund Contribution.</li> </ol>	uð.	\$5.00 May Be Added to Fees	100000987137 01/19/06-80026-020 150.00			
10. OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALIL, EDUARDO A 9401 S.W. 35TH ST MIAMI, FL 33165							
NAME STREET ADDRESS CITY-ST-ZIP	S NAYA, LUIS E 7400 NW 7 STREET # 101 MIAMI, FL 33126							
TITLE NAME STREET ADDRESS GTTY-ST-ZIP	V GONZALEZ, ROLANDO G 6400 SW 93 AVE. MIAMI, FL 33173			DO	NOT WRITE			
TITLE NAME STREET ADDRESS OTTY-ST-ZIP			•	IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					 			
MLE	•	•			·			

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 accurrate 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 embowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered.

SIGNATURE: \_

STREET ADDRESS CITY-ST-ZIP

MONATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 10, 200 & (35) 262 500 5