2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-13-2006 90036 027 ***150.00 DOCUMENT # V06476 P & A CONSTRUCTION INC. Mailing Address Principal Place of Business 14545 S.W. 75 STREET 14545 S.W. 75 STREET MIAMI, FL 33183 MIAMI, FL 33183 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 01312006 Cha-P Applied For City & State City & State 4. FEI Number -65-0306459 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ORTEGA, PEDRO M. Street Address (P.O. Box Number is Not Acceptable) 14545 S.W. 75 STREET MIAMI, FL 33183 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 alignature required when reinstating) -\$5.00 May Be __FILE.NOWIII_FES-IS-\$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change TITLE ☐ Delete TITLE Addition ORTEGA, PEDRO M. NAME NAME 14545 S.W. 75 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition ORTEGA, ANA M. NAME NAME 14545 S.W. 75 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete DILE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental eport synue 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 employeed of 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 principles empowered.

FILED Feb 13, 2006 8:00 am

Secretary of State