FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APF	OMB APPROVAL							
OMB Number: 3235-0104								
Estimated average burden								
hours per response	e: 0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Harris Ray		2. Date of Event Requiring Staten Month/Day/Year 01/26/2010	nent	3. Issuer Name and Ticker or Trading Symbol MASTEC INC [MTZ]								
(Last) (First) (Middle) 800 DOUGLAS RD							10% Owne	er	5. If Amendment, Date of Original Filed (Month/Day/Year)			
12TH FLOO	К				X	Officer (give title below)		Other (spe below)	СПУ		lividual or Joint cable Line)	/Group Filing (Check
(Street)						Pr	resident			X	Form filed by	y One Reporting Person
GABLES	FL	33134									Form filed by Reporting Po	y More than One erson
(City)	(State)	(Zip)										
		٦	able I - Non	-Derivati	ive Se	curities Ben	neficially	/ Owned				
1. Title of Secu	rity (Instr. 4)	1	able I - Non	2	. Amou	ecurities Ben nt of Securities ally Owned (Inst	tr. 4)	Owned 3. Ownersh Form: Direct or Indirect (Instr. 5)	ct (D) (4. Natı (Instr.		Beneficial Ownership
1. Title of Secu	rity (Instr. 4)		Table II - D	2 B Derivative	. Amou enefici	nt of Securities	tr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	et (D) ((I)			Beneficial Ownership
Title of Secu Title of Deriv	. ,	(e. _!	Table II - D	2. Berivative Is, warra	Seconts, o	nt of Securities ally Owned (Inst	ficially C	3. Ownersh Form: Direct or Indirect (Instr. 5) Owned securities	et (D) ((I)	sion		6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ Ray Harris</u> <u>01/29/2010</u>

** Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).