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**May 01 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



**FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # 397786 (5)
1. Corporation Name
ATLANTIC GULF ENGINEERING COMPANY



Principal Place of Business: LEGAL DEPT 9TH FLOOR, 2601 S. BAYSHORE DR., MIAMI FL 33133-2461
Mailing Address: LEGAL DEPT 9TH FLOOR, 2601 S. BAYSHORE DR., MIAMI FL 33133-5417

3. Date Incorporated or Qualified: **03/20/1972**
3a. Date of Last Report: **04/16/1996**
4. FEI Number: **59-1398859**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 Suite, Apt #, etc.; 27 City & State; 28 Zip; 29 Country; 30 Country

9. Name and Address of Current Registered Agent
**LANGLEY, MARCIA H
LEGAL DEPT., 9TH FLOOR
2601 S. BAYSHORE DRIVE
MIAMI FL 33133**

10. Name and Address of New Registered Agent
81 Name: **JOEL K. GOLDMAN**
82 Street Address (P.O. Box Number is Not Acceptable): **2601 S. BAYSHORE DR.**
83: **9th floor**
84 City: **Miami** FL 85 Zip Code: **33133**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Joel K. Goldman* (NOTE: Registered Agent signature required when reinstating) DATE: **4/11/97**

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	JEFFREY, THOMAS W.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	
CITY - ST - ZIP	MIAMI FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	LANGLEY, MARCIA H.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	
CITY - ST - ZIP	MIAMI FL 33133	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	FISCHER, JOHN H.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	
CITY - ST - ZIP	MIAMI FL	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	GOLDMAN, JOEL K.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	
CITY - ST - ZIP	MIAMI FL 33133	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CARLETON, CALLIS N.	
STREET ADDRESS	2601 S BAYSHORE DR	
CITY - ST - ZIP	MIAMI FL 33133	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MACNAIR, CHRISTOPHER J.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	
CITY - ST - ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	GOLDMAN, JOEL K.	
1.3 STREET ADDRESS	2601 S. BAYSHORE DR	
1.4 CITY - ST - ZIP	MIAMI FL 33133	
2.1 TITLE	VAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LANGLEY, MARCIA H.	
2.3 STREET ADDRESS	2601 S. BAYSHORE DR	
2.4 CITY - ST - ZIP	MIAMI FL 33133	
3.1 TITLE	VDR/VAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	CARLETON, CALLIS	
3.3 STREET ADDRESS	2601 S. BAYSHORE DR	
3.4 CITY - ST - ZIP	MIAMI FL 33133	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joel K. Goldman* DATE: **4/11/97** DAYTIME PHONE #: **305-859-4071**

CR2E034 (9/96)