

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2008 8:00 am
Secretary of State

02-07-2008 90017 024 ***150.00

DOCUMENT # 440573	
1. Entity Name E & E CONSULTING ENGINEERS, INC.	

Principal Place of Business 3320-B NE 32 ST FORT LAUDERDALE FL 33308 US	Mailing Address 3320-B NE 32 ST FORT LAUDERDALE FL 33308 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

66003146

1st MOORE CR2E034 (10/07)

4. FEI Number 59-1520553	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ERQUIAGA, EUGENIO 7880 HOLMBERG RD. PARKLAND FL 33067

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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 Eugenio Erquiaga DATE 3-4-08

FILE NOW! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ERQUIAGA, EUGENIO 7880 HOLMBERG RD. PARKLAND FL 33067 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOLLMANN, ANDRES M 330 NW 38 ST OAKLAND PARK FL 33309 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME SAME 226 NW 38 ST. SAME ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eugenio Erquiaga **EUGENIO ERQUIAGA** 3-4-08