2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41454

FILED Apr 25, 2008 Secretary of State

Entity Name: CHEN AND ASSOCIATES CONSULTING ENGINEERS, INC.

Current Principal Place of Business: New Principal Place of Business: 500 WEST CYPRESS CREEK ROAD SUITE 410 FORT LAUDERDALE, FL 33309 **Current Mailing Address: New Mailing Address:** 500 WEST CYPRESS CREEK ROAD SUITE 410 FORT LAUDERDALE, FL 33309 US FEI Number: 59-2739866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHEN, BEN H PETER MOORE 500 WEST CYPRESS CREEK ROAD 500 WEST CYPRESS CREEK ROAD SUITE 410 SUITE 410 FORT LAUDERDALE, FL 33309 US FORT LAUDERDALE, FL 33309 US 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. SIGNATURE: PETER MOORE 04/25/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CHEN, BEN HSUEH HAI, Name: Name: PETER MOORE, 1854 NW 97TH AVENUE 1854 NW 97TH AVENUE Address: Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: PLANTATION, FL 33322 Title: DTDV (X) Delete Title: () Change () Addition Name: MOORE, PETER M Name: 915 WEST LAS OLAS Address: Address: FORT LAUDERDALE, FL 33312 City-St-Zip: City-St-Zip: Title: Title: DT () Delete () Change () Addition MCCLAIR, JASON J Name: Name: 800 WEST AVENUE #403 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: DS () Delete Title: () Change () Addition BELLO, OSCAR R Name: Name: Address: 2801 NE 183 STREET, 2106W Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER MOORE DP 04/25/2008