

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41454

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: CHEN AND ASSOCIATES CONSULTING ENGINEERS, INC.

## Current Principal Place of Business:

500 WEST CYPRESS CREEK ROAD  
SUITE 410  
FORT LAUDERDALE, FL 33309 US

## New Principal Place of Business:

## Current Mailing Address:

500 WEST CYPRESS CREEK ROAD  
SUITE 410  
FORT LAUDERDALE, FL 33309 US

## New Mailing Address:

FEI Number: 59-2739866      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETER MOORE.  
500 WEST CYPRESS CREEK ROAD  
SUITE 410  
FORT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: PETER MOORE,  
Address: 1854 NW 97TH AVENUE  
City-St-Zip: PLANTATION, FL 33322

Title: DT ( ) Delete  
Name: MCCLAIR, JASON J  
Address: 800 WEST AVENUE #403  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS ( ) Delete  
Name: BELLO, OSCAR R  
Address: 2801 NE 183 STREET, 2106W  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PETER MOORE,  
Address: 915 WEST LAS OLAS  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DT (X) Change ( ) Addition  
Name: MCCLAIR, JASON J  
Address: 524 ORTON AVENUE #504  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: DS (X) Change ( ) Addition  
Name: BELLO, OSCAR R  
Address: 2508 SW 14TH STREET #704  
City-St-Zip: FORT LAUDERDALE, FL 33315

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 M. MOORE

DP

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date