## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

% ANGEL REYES



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J73752

(4)

Mailing Address

% ANGEL REYES

FIRE SPRINKLER DESIGN GROUP, INC.

13285 S.W. 103RD TERRACE MIAMI FL 33186		13285 S.W. 103RD TERR MIAMI FL 33186-2837	13285 S.W. 103RD TERRACE MIAMI FL 33186-2637						
						3. Date incorporated or Qualified 05/20/1987.		e of Last F  2/1996	Report
2. Principal P	iace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	- <u>L</u>	LA	pplied For
21		26				59-2822726		N	lot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	········			5. Certificate of Status Desired		7	Additional
22		27				Tr Oblinibatio of Ottato Dodinos	<u> </u>	Fee R	lequired
City & State		City & State	<b>⊢</b>			6. Election Campaign Financing \$5.00 May Be			
<b>23</b> Zip	Country	<b>[28]</b> Zip				Trust Fund Contribution	<u> </u>		to Fees
	<u>├</u> ¬	<u> </u>	<del></del>	ountry		8. This corporation has liability for in			s. 199.032,
24	25 9. Name and Address of Cu	29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	30			Florida Statutes   10. Name and Address of New Reg		No	<del> </del>
DEV		Tront Hogistered Agent		81	Name	IV. Hallie and Address of New Pag	JISTOTOU M	Rottr	
REYES, ANGEL 13285 S.W. 103RD TERRACE									
	MI FL 33186		82 Street Add		Street Ad	ddress (P.O. Box Number is Not Acceptab	le)		
MIN	MI LE 22100		}	83		<del></del>			
				••					
				84	City		FL	1 .	Code
11. Pursuant to office or re agent. La	to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the c	.0502 and 607.1508, Florida Statu State of Florida. Such change was obligations of, Section 607.0505, F	ites, the ab authorized lorida Stati	oove i by utes	named co the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of o	changing introduct as	its registered s registered
SIGNATURE									
<del></del>	5 gliabus, typen or printed hame of registres			l Age	nt signature rec	quired when reinstating)	DATE		
12.	DEFICER:	S AND DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFICE	<del></del>		
NAME	REYES, ANGEL	Octen	1.1 717				L	Change	☐ Addition
	13285 S.W. 103 TERRACE	<u>.</u>	1.2 NA						
STREET ADDRESS	MIAMI FL	••	ı		ADDRESS				
CITY - ST - ZIP TITLE	V	DELETE	1.4 CIT	_	T- ZIP		г	7 6	Autolitican
	REYES, NEYDA.	LJ betere	2.1 TIT				Ļ	Change	∐ Addition
NAME OXUGEN ADDRESS	13285 S.W. 103 TERRACE	<u> </u>	2.2 NA						
STREET ADDRESS	MIAMI FL	••			ADDRESS				
CITY-ST-ZIP	WANI L	DELETE	2.4 CI		iTZIP			7 (1	4.435:
TOLE		- DETERE	31 717		-		L	Change	Addition
NAME			3 2 NA						
STREET ADDRESS					ADDRESS				
CITY+S1+ZIP TITLE	The second secon	DELETE	3.4. Cf		T-2(P			1 65	12425-
		☐ betett	4.1 TJT				L	Change	Addition
NAME			4 2 NA						
STREET ADDRESS			1		ADDRESS				
CITY - ST - 7IP		DELETE	4 4 CiT		r-ziP	Harana da		10	
TIFLE		LJ DELETE	51 TfT				L	Change	Addition
NAME			5.2 NA						
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-7#		DCI FIG	5.4 CIT	_	r-zip			10:	
1) FLF		DELETE	61 TIT				L	Change	Addition
NAME			6.2 NA		ŀ				i
\$TREET ADDRESS					ADDRESS				
CITY_CL. 7.D			6.400		T 7100				1

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.