

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000066983

1. Entity Name
STRATEGIC RESOURCE ENGINEERING, INC.



Principal Place of Business

1428 BRICKELL AVE
SUITE 500
MIAMI, FL 33131

Mailing Address

1428 BRICKELL AVE
SUITE 500
MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE



06142006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1117428

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GODWARD, V. MARK
1428 BRICKELL AVE
SUITE 500
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when restate.) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME GODWARD, V. MARK
STREET ADDRESS 1428 BRICKELL AVE. STE. #500
CITY-ST-ZIP MIAMI, FL 33131

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000000567288
06/19/06-80001-016 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

V. M. Godward MARK Godward

6/15/06 305.579.5880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #