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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

305-477-6472

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000027010 (5)

FORD ENGINEERS, INC.

SIGNATURE:

TOTIL E	NGMLENS, INO.					
Principal Place of Business		Mailing Address		# ####################################	14 00148 1 4011 40444 00461 14011 0014 910 4	
8000 N.W. 315T ST.		8000 N.W. 31ST ST. Suite 7				
MIAMI FL 33122		MIAMI FL 33122-1049				
					3. Date Incorporated or Qualified 04/08/1994	3a. Date of Last Report 03/05/1996
2. Principal FI 21	ace of Bus ness	2a, Mailing Address 26			4. FEI Number 65-0485549	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	/	Trust Fund Contribution P. This corporation has liability for	Added to Fees
24	25	29	30		This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
9. Name and Address of Current Registered Agent					10. Name and Address of New Ro	agistered Agent
	ezarreta, manuel j		81	Name		
8000 SUIT) N.W. 31ST ST. TF 7		82	82 Street Address (P.O. Box Number is Not Acceptable)		ble)
	MI FL 33122		83			
			84	City		FL 85 Zip Code
11. Pursuant to office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607 1508, Florida Statu of Florida. Such change was	tes, the abov authorized b	e-named corp y the corporat	oration submits this statement for the ion's board of directors, I hereby acce	purpose of changing its registered pt the appointment as registered
CLONIATURS	_		orida Statute	s.	·	,
SIGNATORE	Signal var hypotholopony-diffusivi of registered add			ent signature requit	ed when reinstaling)	DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI	
TITLE	ECHEZARRETA, MANUEL	DELETE	1.1 TITLE			Change Addition
NAME OTDETT ADDRESS	8000 N.W. 31ST ST. #7		1.2 NAME	t ADDRESS	•	
STREET ADDRESS CITY - S1 - ZIP	MIAMI FL		1.4 CITY-	T ADDRESS	•	
TITLE	V	DELETE	2 1 TITLE			Change Addition
MAME	ARMENTEROS, OMAR		22 NAME			
STREET ADDRESS	8000 N.W. 31ST ST. #7		23 STREE	T ADDRESS		
CHTM - ST - ZIP	MIAMI FL 33122		2 4 CITY-	ST-ZIP		
TIT_E	ST	☐ DELETE	31 TITLE			Change Addition
NAME	MANUCY, JOHN H		32 NAME	ŀ		
STREET ADDRESS	8000 N.W. 31ST ST. #7		3 3 STREE	T ADDRESS		
CHY-SI-ZIP	MIAMI FL 33122	Deltte	3 4. CITY-	ST-ZIP		
THILE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME STREET ADDRESS			4. 2 NAME	T ADDRESS		
CITY-ST-ZIP			4.3 STREE	ļ		
TITLE		DELETE	5.1 TITLE	21-14		Change Addition
NAME			5.2 NAME			_ • <u>-</u> • • • • • • • • • • • • • • • • • • •
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-7IP			5.4 CITY -	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREE	1 ADDRESS		
CITY-ST-7IP			6.4 CITY-			
information I am an o	in inclicated on this about report or s fficer or director of the corporation or	supptemental annual report is the receiver or trustee empor	true and acc vered to exe	urate and that	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg rt as required by Chapter 607, Florida	al effect as if made under oath; that
appears i	n Block 12 or Block 13 if charged, o	r on an altachment with an ac	dress.			·