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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000043178

F & F ENGINEERING CONSULTANT, INC.

Principal Place of Business		Mailing Address	Mailing Address				I Identities the settle				
10300 SW 72ND	ST.	10900 SW 72ND ST.									
SUITE #158		SUITE #158	• • · - · ·				DO NOT W	RITE IN THIS	SPACE		
MIAMI FL 33173		MIAMI FL 33173				h	3. Date Incorporated or Qualife		O. AOL	,	
						"	05/21/1996			/	
Principal Place of Business     2a. Mailing Address				<u>.</u>			4. FEI Number		Api	plied For	
21		<del></del>	26				65-0689853			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							\$8.75 A	dditional	
22	·	27	27				5. Certificate of Status Desired		Fee Re	quired	
City & State	<del></del>	City & State				6	6. Election Campaign Financin	9 🗔	\$5.00	May Be	
23		28	28				Trust Fund Contribution		Added to	o Fees	
Zip	Country	Zip	Zip Country			8	8. This corporation owes the co	arrent year Int		_	
24	25	29	30				Personal Property Tax.			□No	
	<ol><li>Name and Address of Currer</li></ol>	nt Registered Agent				10	<ol><li>Name and Address of Nev</li></ol>	Registered	Agent		
				81	Name						
	AS, ALEXANDER G		82 Stre			Address (	(P.O. Box Number is Not Acce	ptable)			
	1 N. KENDALL DRIVE										
	E 204			83							
MIAN	II FL 33176			84	City			FL	85 Zip C	ode	
	to the provisions of Sections 607.050	22 and 607 4509. Florida Statuto	a the ek		named e	corporati	ion submits this statement for the		changing its	registered	
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	thorized	DA.	the corpoi	oration's l	board of directors. I hereby acc	cept the appoi	ntment as req	jistered	
SIGNATURE											
Signature, typed or printed name of registered agent and title if applicable (NOTE:					egistered Agent signature requir			DATE	ID DIRECTO	DC IN 12	
12.	OFFICERS AND DIRECTORS  DELETE		13.				ADDITIONS/CHANGES TO C	JEFICERS AN	Change	Addition	
TITLE	P SUICEPERA ENLISTA E		1.1 TITLE								
NAME	GUERRERO, FAUSTO E		1.2 NAME 1.3 STREET ADDRESS								
STREET ADDRESS	6102 SW 114 CT.										
CiTY-ST-ZIP	Delete.		_	1.4 CITY-ST-ZIP 2.1 TITLE					Change	Addition	
TITLE	VD		2.1 II1LE 2.2 NAME								
NAME	GUERRERO, FELIPE E										
STREET ADDRESS	11452 SW 28 TERRACE		2.3 STREET ADDR 2. 4 CITY- ST- ZIP								
CITY-ST-ZIP	MIAMI FL 33165	☐ DELETE			T- ZIP				Change	Addition	
TITLE	☐ pereie			3.1 TITLE							
NAME			3.2 NAME						ļ		
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP	DELETE			3.4. CITY-ST-ZIP					Change	Addition	
TITLE		☐ DETEIE			1	ı			Comminge		
NAME			4. 2 NA			İ					
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			_	4.4 CITY-ST-ZIP 5.1 TITLE					☐ Change	Addition	
TITLE !		☐ DETE1E	5.1 TH 5.2 NA						L. Cribings		
NAME					ADDRESS						
STREET ADDRESS					1						
CITY-ST-ZIP			5.4 CIT 6.1 TIT		1-ZIP				Change	Addition	
TITLE		☐ DELETE	1						change		
NAME			6.2 NA								
STREET ADDRESS			6.3 ST	KEET	ADDRESS						

6.4 CITY-ST-ZIP

14. I 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

SIGNATURE:

CITY-ST-ZIP

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90257 020 \*\*\*155.00