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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000063909 (0)

TRUE ENGINEERING & CONSULTING CORP.

Principal Place of Business

Mailing Address

152 RIVER CHASE DRIVE ORLANDO FL 32907 152 RIVER CHASE DRIVE ORLANDO FL 32807

## FILED Mar 05 1998 8:00am Secretary of State



				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
6 Delegand D	In Table Design	A. Marillan A. Janes		07/23/1997	
	lace of Business	2a. Mailing Address	MAGAG	4. FEI Number	Applied For
	WELLSMERE C	Suite, Apt. #, etc.	MORE CI	KCB	Not Applicable
Suite, Apt.		27	=	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	FL	6. Election Campaign Financing	\$5.00 May Be
	ando fl	28 OR LANDO		Trust Fund Contribution	Added to Fees
Zip 32	835 Country 25 USA	Zip 32835 3	Country  O  O  O  O  O  O  O  O  O  O  O  O  O	<ol> <li>This corporation owes or has paid the cu Personal Property Tax due June 30.</li> </ol>	ırrent year Intangible ☐ Yes 🔀 No
24	9. Name and Address of Curren			10. Name and Address of New Registered	
04 N					
POOL OUNDATION & POOL S					
-   0,000				Address (P.O. Box Number is Not Acceptable)	CIRCLE
2548 BLAIRSTONE PINES DRIVE TALLAHASSEE FL 32301				7912 WELLSMERE	UIZULO
IALLANASSEE PL 32301				·	
			64 City	ORLANDO FL	85 Zip Code
11 Pureuant I	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutos	1 [	• • • • • • • • • • • • • • • • • • • •	
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized by the corp	corporation submits this statement for the purpose operation's board of directors. I hereby accept the ap-	pointment as registered
-	m lamiliar with, and accept the obliga		da Statutes.		100
SIGNATURE	AMP. 7. GAWAP Signature, typed or printed name of registered age	nt and title if application	Registration of the contract o	required when reinslating) 2/5	/78
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	PID	Change Addition
NAME	GAWAD, AMR T		1.2 NAME	GAWAD AMP T	
STREET ADDRESS	152 RIVER CHASE DRIVE		1.3 STREET ADDRESS	GAWAD, AMR T 7912 WOLLSMERE CIRCLE OPLANDO FL. 32835	:e
CITY-ST-ZIP	ORLANDO FL 32807		1.4 CITY-ST-ZIP	PRIANDO EL. 32835	-
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME ]			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		j
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		İ
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		on [
STREET ADDRESS			5.3 STREET ADDRESS		25
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	ייים איניים איני איני אוריים איניים איני איניים איניים	Change Addition
NAME			6.2 NAME	3000024478	''∦'-⊒⊅ '`d
STREET ADDRESS			6.3 STREET ADDRESS	-03/05/98010090 ***150.00	<b>4</b>
CITY - ST - ZIP			6.4 CITY-ST-ZIP		
14. Thereby 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.					