

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J84973** (3)

1. Corporation Name

FLORIDA TESTING AND ENGINEERING, INC.

Principal Place of Business

**877 N.W. 61ST ST.
FT. LAUDERDALE FL 33309**

Mailing Address

**877 N.W. 61ST ST.
FT. LAUDERDALE FL 33309**

APPROVED
AND
FILED

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/30/1987	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0003500	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under the provisions of Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. County	29. County
25. County	30. County

9. Name and Address of Current Registered Agent

**POLTORACK, RONALD D.
412 S E 18TH STREET
100 SOUTHEAST 2ND STREET, STE 2300
FT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code **FL**

11. Pursuant to the provisions of Sections 607.01(4) and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Agent authorized to accept appointment as registered agent

Signature of Registered Agent of the corporation (if different)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPTS	1. TITLE	☐ Change ☐ Addition
NAME	MORENO, ALEJANDRO	2. NAME	
STREET ADDRESS	4901 N OCEAN BLVD, #1201	3. STREET ADDRESS	
CITY & STATE	FT. LAUDERDALE FL	4. CITY & STATE	
TITLE	VEX	5. TITLE	☒ Change ☐ Addition
NAME	BALLOON, GEORGE	6. NAME	
STREET ADDRESS	865 S WINDY PALM	7. STREET ADDRESS	
CITY & STATE	SUNRISE FL	8. CITY & STATE	
TITLE		9. TITLE	☐ Change ☒ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY & STATE		12. CITY & STATE	
TITLE		13. TITLE	☐ Change ☒ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY & STATE		16. CITY & STATE	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY & STATE		20. CITY & STATE	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY & STATE		24. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from the filing of this report. I further certify that the information is not included in the annual report or supplemental annual report of this corporation and is not included in the annual report of this corporation. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes, and that my name appears on Block 1, or Block 1 of the change of address statement with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95

305-938-4404