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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000092341 (3)

CEJAY ENGINEERING, INC.

Principal Place of Business Mailing Address								
676 THRUSH CT MARCO ISLAND FL 33937		676 THRUSH CT Marco Island FL 34145-1932						
					3. Date Incorporated or Qualified 12/04/1995	3a. Date of Last F 02/27/1996	Report	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	[A	pplied For	
21		26			65-0628429 Not Applicab		ot Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution		to Fees	
Zip 24	Country Zip 25 29		30 Cou	ntry				
	Name and Address of Curre	ont Registered Agent			10, Name and Address of New Re	gistered Agent		
HAY	ynes, derek			81 Name				
676 THRUSH CT			-	82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
MAI	RCO ISLAND FL 33937		!	83				
				84 City		85 Zip	Code	
						FL "		
office or agent 1 a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obli- signer entype or product make of registered a				rporation submits this statement for the pation's board of directors. I hereby acceptions when reinstating)	DATE CONTINUES	registered	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12	
THIE	PVST	DELET	TE 1.170	ILE		Change	Addition	
NAME	HAYNES, DEREK		1.2 N	IME				
STREET ADDRESS	676 THRUSH CT		1.3 \$1	REET ADDRESS				
011Y-ST-71P	MARCO ISLAND FL 33937		140	IY-ST-ZIP				
DILE	D	DELE1	TE 21 TI	T.E.		☐ Change	Addition	
NAME	HAYNES, DEREK		22 N	ME				
STREET ADDRESS	676 THRUSH CT		2.3 \$1	REET ADDRESS				
CITY-S1-ZIF	MARCO ISLAND FL 33937		2.40	ITY-ST-ZIP				
TITLE		DELET	TE 3.1 TI	TLE		Change	Addition	
NAME			3.2 N/	ME				
STREET ADDRESS			335	REET ADDRESS				
CHY-ST-ZIP				ITY-ST-ZIP				
TITLE		☐ DELET	TE 4.1 Tf	LE		Change	Addition	
NAME			4, 2 N	AME				
STREET ADDRESS			4.3 \$1	REET ADDRESS				
CITY - S1 - ZIP				TY-ST-ZIP				
TIT: E		DELET	TE 5.1 TI	ILE		Change	Addition	

6.4 CITY - ST- ZIP 14. I do 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 Block 12 or Block 13 if changed, or on an attachment with an address.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

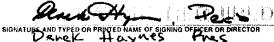
NAME

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

CITY-\$1-7/2



DELETE

Change

Addition

FILED

Feb 24 1997 8:00am

Secretary of State