XDNSTRUCTION ANALYSIS SYSTEMS, INC.       0-1-29-2002 90/01 0/08 ***150.00         Impgin Place of Business       Mailing Accesses         XDMS FILE OF Dial Status       Status         XDMS FILE STATUS       Status         XDMS FILE STATUS       Status         XDMS AF and Status       City         YTHE and and Address of New FlopPart Af and Status       City         YTHE and Address of New FlopPart Af and Status       City         TAMPA FL SSSAL			INESS REP	ORT (UBR)	FILED Apr 29, 2002 8:00 am Secretary of State
Product Proceedings Proceeding of Status and Address of Current Registered Agent  Product Proceeding Proceedi	Entity Name	• +110			
	JUNSTRU	UCTION ANALYSIS SYSTE	MS, INC.		04-29-2002 90091 008 *** 130.00
Name       Tables it table					
Stort, A.B., File       Stort, A.B., File       DO NOT WRITE IN THIS SPACE         Stort, A.B., File       Stort, A.B., File       Applied For         City & Stort       C.Y. & Stort       Applied For         City & Stort       C.Y. & Stort       Stort, A.B., File         Zip       Country       Zip       Country       Stort, A.B., Manual A.B., And Manual A.B., Stort, A.B.	FAMPA FL 336	624	TAMPA FL 33624		A karaka arabar karaka karaka karaka karaka dari karaka dari karaka dari karaka karaka dari karaka dari karaka
Suite Apt # dtc.       DO NOT WHITE IN THIS SPACE         City & State       City & State       4. FEI Number       Applied for Nex Applied of Nex Applied of State Based       State Applied for Nex Applied of Nex Acceptable State Address of New Registered Agent         EPLEY, WENDY SSD GUINH HWY SSD GUINH HWY ZO TEX HUNGS SSD GUINH HWY				Hinry	
City & State       4. FEI Number       Sp-1561740       Applied For Not Application         Zip       Country       3. Continue of Status Desired       Se 75 and Desired       Not Application         B: Name and Address of Current Registered Agent       7.* Name and Address of Current Registered Agent       Not Not Acceptable)         EFELF, WENDY       Status Desired       Fel Address       Not Acceptable)         Status Data       Status Desired       Fel Address       Not Acceptable)         Status Data       City       FL       Zip Code         Internet       Status Desired       Fel Address       Not Acceptable)         Status Data       City       FL       Zip Code         Internet       City       FL       Site Code       Zip Code         Internet       City       FL       Site Code       Site Code       City       Zip Code <td>Suite, Apt. #</td> <td>#, etc.</td> <td>Suite, Apt. #, etc.</td> <td>www.iiuj</td> <td>DO NOT WRITE IN THIS SPACE</td>	Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	www.iiuj	DO NOT WRITE IN THIS SPACE
Zip       Country       Zip       Country       S. Cartificate of Status Desired       SS. 75 Additional For Preparind         Se. Mame and Address of Current Registered Agent       X.* Mame and Address of New Registered Agent       X.* Mame and Address of New Registered Agent         EPLEY, WENDY SCR0 GUNN HWY       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       Street Address of New Registered Agent       The concentration is not acceptable)         Street Address (P.O. Box Number is Not Acceptable)       Street Address of New Registered Agent       The concentration is not acceptable)       The concentration is not acceptable)         Street Address (P.O. Box Number is Not Acceptable)       Street Address of New Registered Agent       The concentration is not acceptable)       The concentration is not acceptable is Not Acceptable)         Street Address of New Registered Agent and the transmit for the purpose of champing its registered agent, or both, in the State of Florida.       NATURE       The concentration is not acceptable is Not Acceptable)       Date         Street Address of New Registered Agent and the transmit for the purpose of champing its registered agent, or both, in the State of Florida.       Street Address of New Registered Agent and New Registered Agent agent and the transmit for the purpose Agent and the transmit for the purpose Address of New Registered Agent agent and the transmit for the purpose Address of New Registered Agent agent and the transmit for the purpose A			City & State		
Control Registered Agent	Zip	Country	Zip	Country	5. Certificate of Status Desired 7 \$8.75 Additional
EPLEY, WENDY       Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       If the Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       If the Address (P.O. Box Number is Not Acceptable)         NATURE       Street Address (P.O. Box Number is Not Acceptable)       If the Address (P.O. Box Number is Not Acceptable)         NATURE       City       FL       2p Code         The adove named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.       NATURE         Sequences and entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.       Address (P.O. Box Number is Not Acceptable)         NATURE       Sequences address (P.O. Box Number is Not Acceptable)       Date         This copposition is eligible to address is in the public address address (P.O. Box Number is Not Acceptable)       Date         This copposition is eligible to address is address (P.O. Box Number is Not Acceptable)       Date         OFFICERS AND DIRECTORS       12.       Address (P.O. Address		6."Name and Address of Current	Registered Agent	Nomo	
TAMPA FL 33824       City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       Inter above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.         SNATURE	-				ss (P.O. Box Number is Not Acceptable)
SNATURE	STE 240			City	FL Zip Code
Bigwain         Note:         Differences         (VOTE: Importance Agent augmature required when interacting)         DATE           This coprocration is eligible to satisfy its Intangible Task liftig requirement and elects to do so. (See criteria on back)         FILE NOW!!! FEE IS \$150.00 Make Check Payable to Department of State         10. Election Campaign Financing Trust Fund Contribution.         \$5.00 May Be Added to Foes           Copy of the depart of	The above n	named entity submits this statement fo	or the purpose of changing it	ts registered office or regis	stered agent, or both, in the State of Florida.
OFFICERS AND DIRECTORS         12.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11           E         P         Inte	This corpora	ation is eligible to satisfy its Intangible	FILE NOW		
E       CUNILL, BUENAVENTURA C.       NME       Intel Addition         STREF ADDRESS       SO20 GUNN HWY 240       STREF ADDRESS       CITY-ST-2IP         E       Intel Intel Intel Internation supplied with this filing does not qualify for the exemption stated in Section 118 07(3)(1), Florida Statutes. I further certify that the information internation of the report or supplemental report in the information.       Addition	-	· · · · · · · · · · · · · · · · · · ·			U Trust Eurod Contribution
E       NAME         ET ADDRESS       STHEET ADDRESS         ST-2P       ITLE         E       ITLE         Addition         ST-2P       ITLE         ST-2P       ITTLE         NAME       ITLE         NAME       ITLE         NAME       ITTLE         NAME       ITTLE         ITTLE       IChange         Addition       ITTLE         NAME       ITTLE         ITTLE       IChange         ITTLE       IChange         ITTLE       IChange         ITTLE       IChange         ITTLE       IChang	-	a on back)	Make Check Paya	ble to Department of S	Trust Fund Contribution.
-ST-ZP CUTY-ST-ZP CUTY	(See criteria E   IE   EET ADDRESS	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240	Make Check Paya	able to Department of S 12. TITLE NAME STREET ADDRESS	Trust Fund Contribution.         Added to Fees           ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change         Addition
E       Interference       Interferen	(See criteria	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240	Make Check Paya	able to Department of S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Trust Fund Contribution.     Added to Fees       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change     Addition
E       Image: Change in addition         E       Image: Change in addition         ST-ZIP       Image: Change in addition         E       Image: Change in addition         ST-ZIP       Image: Change in addition         E       Image: Change in addition         ST-ZIP       Image: Change in addition         Image: State in addition       Image: Change: Change in addition         Image: State in addit this filling does not qualify for the exemption stated	(See criteria E     EET ADDRESS   -ST-ZIP E E EET ADDRESS	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240	Make Check Paya	able to Department of S	Trust Fund Contribution.     Added to Fees       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change     Addition
E       NAME         ET ADDRESS       STREET ADDRESS         -ST-ZIP       Delete         Image: Delete       TITLE         E       Image: Delete         STREET ADDRESS       STREET ADDRESS         -ST-ZIP       Image: Delete         E       STREET ADDRESS         -ST-ZIP       Image: Delete         FT ADDRESS       STREET ADDRESS         -ST-ZIP       Image: Delete         Image: Delete       TITLE         NAME       Image: Delete         The ADDRESS       STREET ADDRESS         -ST-ZIP       Image: Delete         Image: Delete       TITLE         NAME       STREET ADDRESS         STREET ADDRESS       Image: Delete         Image: TADDRESS       STREET ADDRESS         ST-ZIP       Image: Delete         Image: Table       Image: Delete         Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 1 further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if imade under oath; that 1 am an officer or director of the receiver of the receiver of the section the same legal effect as if imade under oath; that 1 am an officer or director of the receiver of the receiver	(See criteria E E EET ADDRESS -ST-ZIP E E E E E E E E E E	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240	Make Check Paya	Able to Department of S	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition
E       NAME         EET ADDRESS       STREET ADDRESS         -ST-ZIP       CITY-ST-ZIP         E       Delete         TITLE       Change         KET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       Change         Addition         KE       STREET ADDRESS         STREET ADDRESS       STREET ADDRESS         ST-ZIP       CITY-ST-ZIP	(See criteria E AE EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS -ST-ZIP	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240 TAMPA FL 33624	Make Check Paya	Able to Department of S  12.  TITLE NAME STREET ADDRESS GITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition         Change       Addition
-ST-ZIP  -ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  Change Addition  Addition  Change Addition  Change Addition  Change Addition  Change Addition  City-ST-ZiP  City-ST-Z	(See criteria E E EET ADDRESS '-ST-ZIP E EET ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E T ADDRESS	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240 TAMPA FL 33624	Make Check Paya	able to Department of S         12.         TITLE         NAME         STREET ADDRESS         GITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition         Change       Addition
TADDRESS ST-ZIP 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 report or supplemental 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 of trustee empowered to every the this report as required by the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee empowered to every the this report as required by the same legal effect as if made under oath; that I am an officer or director	(See criteria E E E E E E E E E E E E E E E E E E E	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240 TAMPA FL 33624	Make Check Paya	able to Department of S         12.         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition         Change       Addition         Change       Addition         Change       Addition         Change       Addition
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 report or supplemental 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 are equired by Chapter SAZ. Elevide Statutes and the trustee 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 are equired by Chapter SAZ. Elevide Statutes and the trustee the same legal effect as if made under oath; that I am an officer or director of the corporation of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; th	(See criteria E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240 TAMPA FL 33624	Make Check Paya	Title     Title       NAME     STREET ADDRESS       CITY-ST-ZIP     TITLE	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition         Change       Addition         Change       Addition         Change       Addition         Change       Addition
changed, or on an attachment with an address, with all other like empowered.	(See criteria E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP	A on back) OFFICERS AND P CUNILL, BUENAVENTURA C. 5020 GUNN HWY 240 TAMPA FL 33624	Make Check Paya	Title       NAME       STREET ADDRESS       CITY-ST-ZIP       TITLE       NAME       STREET ADDRESS       CITY-ST-ZIP	Trust Fund Contribution.       Added to Fees         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Change       Addition         Change       Addition