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FILED  
May 20 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 415491

(0)

1. Corporation Name **C.H.M.**  
~~CROUSE HONDERICH MOSBAT CONSULTING ENGINEERS, IN~~  
C.

N/C 02/11/97

Principal Place of Business

1320 S DIXIE HWY  
SUITE 1241  
CORAL GABLES FL 33146  
US

Mailing Address

1320 S DIXIE HWY  
SUITE 1241  
CORAL GABLES FL 33146-2940  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23

24

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29

Zip

Country

30

3. Date Incorporated or Qualified  
12/28/1972

3a. Date of Last Report  
03/29/1996

4. FEI Number  
59-1429530

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 s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HONDERICH, DAVID  
1320 SOUTH DIXIE HWY  
SUITE 1241  
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE  
NAME PD  
CROUSE, GEORGE T.  
STREET ADDRESS 1320 S DIXIE HWY #1241  
CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE  
NAME STD  
HONDERICH, DAVID  
STREET ADDRESS 1320 S DIXIE HWY #1242-1  
CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE  
NAME VD  
MOSBAT, MARK  
STREET ADDRESS 1320 S DIXIE HWY #1241  
CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE  
NAME VD  
FIDIAS, SAMUEL DE LEON  
STREET ADDRESS 1320 S DIXIE HWY #1241  
CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME PD  
MOSBAT, MARK  
3.3 STREET ADDRESS 1320 SO. DIXIE HWY, #1241  
3.4 CITY-ST-ZIP CORAL GABLES, FL, 33146

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME VD  
De Leon, Samuel  
4.3 STREET ADDRESS 1320 SO. DIXIE HWY, #1241  
4.4 CITY-ST-ZIP CORAL GABLES, FL, 33146

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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.

SIGNATURE

DAVID HONDERICH

11 07 315 119 421

CR2E034 (9/96)