

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **458460** (3)

1. Corporation Name
ENGEL INCORPORATED

95 JAN 18 PM 4:08

Principal Place of Business
**6991 W. BROWARD BOULEVARD
SUITE 106
PLANTATION FL 33317
US**

Mailing Address
**6991 W BROWARD BLVD
STE 106
PLANTATION FL 33317
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/23/1974	3a. Date of Last Report 07/12/1994
4. FEI Number 59-1615928	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21. State, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. State, Apt. #, etc. 27. City & State 28. Zip 29. Country
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9. Name and Address of Current Registered Agent

**ENGEL, NARIES
561 N.W. 75TH AVE.
PLANTATION FL 33317**

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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: _____ (Name of Agent (signature required) or Secretary)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ENGEL, NARIES
STREET ADDRESS	561 NW 75TH AVENUE
CITY, ST, ZIP	PLANTATION FL
TITLE	S
NAME	ENGEL, FREDY
STREET ADDRESS	561 NW 75TH AVENUE
CITY, ST, ZIP	PLANTATION FL
TITLE	D
NAME	ENGEL, FREDY
STREET ADDRESS	561 NW 75TH AVENUE
CITY, ST, ZIP	PLANTATION FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	SEC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	GREGORY BROWNING
2.3 STREET ADDRESS	561 NW 75TH AVE
2.4 CITY, ST, ZIP	PLANTATION, FL 33317
3.1 TITLE	TRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	GREGORY BROWNING
3.3 STREET ADDRESS	561 NW 75TH AVE
3.4 CITY, ST, ZIP	PLANTATION FL 33317
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 192, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Naries Engel* **NARIES ENGEL** 1-11-95 (305) 587-2092
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #