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

STREET ADDRESS

SIGNATURE:

FILED Apr 28 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # (0)494520 POWER ENGINEERING COMPANY Principal Place of Business Mailing Address 1525 NW 167 ST 1525 NW 167 STREET 145 MIAOMI FL 33169 MIAMI FL 33169 DO NOT WRITE IN THIS SPACE US 3. Date incorporated or Qualified 03/24/1976 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1662343 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes □ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 84 City 65 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition NAME SCOPETTA, JOHN R 1.2 NAME 1525 N.W. 167TH STREET., SUITE 145 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME SCOPETTA, JOHN N 2.2 NAME 1525 N.W. 167TH STREET., SUITE 145 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE SCOPETTA, GEORGE M NAME 3.2 NAME 1525 N.W. 167TH STREET., SUITE 145 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE FERNANDEZ, CARLOS E NAME 4. 2 NAME 1525 N.W. 167TH STREET., SUITE 145 STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE **ASAT** 5.1 TITLE MARTINEZ, MARLENE NAME 5.2 NAME 1525 N.W. 167TH STREET., SUITE 145 5.3 STREET ADDRESS STREET ADDRESS MIAMI FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby 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 frue 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 flip 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 open attachment with an address.

(305) 620-7778