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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

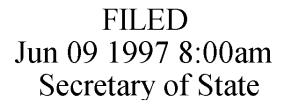
DOCUMENT # 521531

(4)

K & A ENGINEERING, INC.

rincinal	Place	of F	saeniau E

Mailing Address





	H F STREET ITH FL 334 60	•	216 South F Lake Worth)15								
								3. Date Incorporated or Qualified 01/01/1977	3a. Date of Last Report 04/19/1996				
─ ·	2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For		
21			26					59-1705363			No	t Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required					
City & 5	State	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees						
Zip 24		Country 25	Zip 29	- This corporation has naturity for					intangible tax under s. 199.032, ☐ Yes ☐ No				
	9, Name	and Address of Currer	t Registered Agent			81		10. Name and Address of New Re	gistered /	gent			
CHILLINGWORTH, CHARLES C. 324 ROYAL PALM WAY PALM BEACH FL 33480							Name						1
							Street Add	ress (P.O. Box Number is Not Acceptable)					
•	ACIT DENVIL	1 6 00100				83							1
						84	City		FL.	85	Zip (Code	+
l omce	or registered ac	ions of Sections 607.050 gent, or both, in the State ith, and accept the obligi	of Florida, Such cha	ande was a	ulhorizor	d bw	the cornors	poration submits this statement for the pation's board of directors. I hereby accep	ntroced of	chang cintme	ging it	s registered registered	1
SIGNATUR	RE	for printed name of registered age						ured which reinstating)	DATE				
12.	o g. a.o.o.; typeo	OFFICERS AN		(NO)t.	13.	i Mac	i. signatore raqu	ADDITIONS/CHANGES TO OFFIC		DIBE	21/18	2 IAI 2	٦,
TITLE	P	0.11021101111		DELETE	1.1 TF	TLE		ABBITIONO/OFFAIGES TO OFFAIG	LIIO AND	Ch		Addition	}
NAME		Kenneth Jr.			1.2 NA						ago		1
STREET ADDRE		ST PALMA CIRCLE					ADDRESS						8
CITY-ST-ZIP		ALM BCH FL			14 CF								Ļ
TITLE	ST			DELETE	2 1 111					☐ Ch	ange	Addition	┧
NAME		IARIANNE F.			22 NA	ME				_			
STREET ADORE		ST PALMA CIRCLE			2 3 ST	REET	ADDRESS						1
CITY-ST-ZIP		ALM BCH FL			2 4 C		1						
TITLE	112			DELFTE	3 1 717					☐ Ch	ange	Addition	1
NAME					3.2 NA	ME							
STREET ADDRE	ss				3.3 ST	REET	ADDRESS						
CITY-ST-ZIP					3.4. CI	ITY - S	1 - ZIP						
TITLE				DELETE	4.1 111	Lŧ				Ch	ange	Addition	1
NAME					4. 2 N	AMÉ							
STREET ADDRE	ss				4.3 S1	REF1	ADDRESS						
CITY-ST-ZIP					4.4 CI	TY - ST	- ZIP						
TITLE				DELETE	5.1 7(1	L€				Ch	ange	Addition	1
NAME					5.2 NA	ME							
STREET ADDRES	SS				5.3 ST	REET A	ADDRESS						
CITY-ST-ZIP					5.4 CI	TY-ST	- 2IP						
TITLE				DELETE	6.1 TIT	LE				Ch	ange	Addition	1
NAME					6.2 NA	ME	1						
STREET ADDRES	SS				6.3 ST	REET	ADDRESS						
CITY-ST-ZIP					6.4 CF	TY-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 sorregation 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 in hanged, or in an attachment with an address.

1/2 171800