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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 521531

K & A ENGINEERING, INC.

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90013 013 ***150.00



- 1 LPs		Mailing Address			I ranter blite ilbet stan esten filt		II #:#!! Bidi	#1211 P1#11 1881
Principal Place of Business Mailing Address								
216 SOUTH F. S LAKE WORTH F		216 SOUTH F STREET LAKE WORTH FL 33460			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		71 702	
					1			
					01/01/1977 4. FEI Number		ΙΔr	plied For
2. Principal Pl	ace of Business	2a. Mailing Address			(t Applicable
21		26			59-1705363			Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	equired
22	The state of the s	27						
City & State		City & State		6. Election Campaign Financing			May Be to Fees	
23		Zip Country			Trust Fund Contribution			U Fees
Zip	Country			,	8. This corporation owes the curre		ngible □Yes	□No
24	[25]	29 30			Personal Property Tax. 10. Name and Address of New R			
	9. Name and Address of Current	Registered Agent	81	Nome	10. Name and Address of New N	agistereu A	gent	
O. 114	INDIVIDUE CHARLES C		61	Name				. `
	Lingworth, Charles C. Royal-Palm Way	1.	82	Street Addr	ress (P.O. Box Number is Not Accepta	ole)	*	77.46
1 "	M BEACH FL 33480	83		 	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
			84	City		FL	85 Zip	Code
				<u> </u>	poration submits this statement for the		يبلب	
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	a Statute:	S.	on's board of directors. I hereby accep	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS ANI	DIRECTO	ORS IN 12
TITLE		DELETE	1,1 TITLE				☐ Change	Addition
ľ	P TEDOV VENNETU ID	_	1.2 NAME	{				(
NAME	TERRY, KENNETH JR.			ET ADDRESS				Ì
STREET ADDRESS	2198 WEST PALMA CIRCLE		1					ļ
CITY-ST-ZIP	WEST PALM BCH FL	☐ DELETE	1.4 CiTY-5 2.1 TITLE	51-ZIF			Change	Addition
TITLE	ST		2	ł				
NAME	TERRY, MARIANNE F.		2.2 NAME			•		
STREET ADDRESS	2198 WEST PALMA CIRCLE			TADDRESS				_
CITY-ST-ZIP -	WEST PALM BCH FL		2. 4 CITY-				Change	☐ Addition
TITLE	VP	☐ DELETE	3.1 TITLE	ł			change	
NAME	PATRICIA TERRY 2198 W. PALMA CU	elle	3.2 NAME					ł
STREET ADDRESS		-	3.3 STREE	ET ADDRESS				
CITY-ST-ZIP	WEST PALM BUH, FL		3.4. CITY-				Charat	☐ Addition
TITLE		☐ DELETE	4.1 TITLE		•		Change	☐ Addition
NAME	,		4. 2 NAME	:				ļ
STREET ADDRESS			4.3 STREE	ET ADDRESS				Ì
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE .		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME	•		5.2 NAME		•			ļ
STREET ADDRESS			5.3 STREE	ET ADDRESS				İ
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 πħ.Ε				Change	Addition
NAME	[6.2 NAME					ł
			6.3 STREE	ET ADDRESS				
STREET ADDRESS		i	6.4 CITY-					ļ
CITY_\$T_7ID	1		■ V-7 VIII 1 -					

14. 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 annual report of 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 requirer 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 allactionent with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

561-588-3618