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Apr 28 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 # 536626 (5)
1. Corporation Name
GOLDEN EAGLE ENGINEERING CONTRACTORS, INC.

Principal Place of Business
1302 N.W. 33RD STREET
POMPANO BCH FL 33064

Mailing Address
1302 N.W. 33RD STREET
POMPANO BCH FL 33064-2102



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/07/1977	3a. Date of Last Report 03/18/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.			4. FEI Number 59-1753446	Applied For Not Applicable
22. City & State	27. City & State			5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip	28. Zip			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country	29. Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CALLIGAN, BRIAN A 1302 N.W. 33RD STREET POMPANO BCH FL 33064		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALLIGAN, BRIAN A.	1.2 NAME	
STREET ADDRESS	1302 N.W. 33RD STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	POMPANO BEACH FL	1.4 CITY - ST - ZIP	
TITLE	CPT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALLIGAN, HEATHER H.	2.2 NAME	
STREET ADDRESS	1302 N.W. 33RD STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	POMPANO BEACH FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: *Heather Calligan* *Heather Calligan* 4/10/97 (954) 972-6556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
0147782

CR2E034 (9/96)