03-24-1999 90062 031 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

	1999	DIVISION OF CO	ORPORATIONS .	03-24-1999 90062 0	31 ***150.00	
	MENT # 618672					
A & W E	NGINEERING CORP.					
Principal Place	of Business	Mailing Address			41811 41311 41411 avail	#184) 1881
2060 TIGETAIL BLVD. C/O ROSS. CUSANO & CO'S CPA'S						
DANIA FL 33004 18305 BISCAYNE BLVD. #3				DO NOT WRITE IN THE	C CDACE	
us .		MIAMI FL 33160			3 SPACE	<del></del> -
	•	US		3. Date Incorporated or Qualifed 04/18/1979		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applie	d For
21		26		59-1904224	Not A	pplicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Add	itional
22	<u></u>	27	<u></u>	5. Certificate of Status Desired	Fee Requi	red-
City & State	9	City & State		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 Ma Added to F	
Zip -	Country	Zip	Country	8. This corporation owes the current year In		
24	25	· <b>⊱</b>	30	Personal Property Tax.	Yes 🗆	No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	l Àgent	
37			81 Name			
YANOFSKY, ROBERT				dress (P.O. Box Number is Not Acceptable)		
	CASPER COURT				<u></u>	
HOL	LYWOOD FL 33021		83			
		* · · · · · · · · · · · · · · · · · · ·	84 City		85 Zip Cod	le
			'	<u>_</u> FI		<u>,</u>
Affice or re	egistered agent of both in the State	of Florida. Such change was au	thorized by the corporal	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	of changing its reg ointment as regist	jistered lered
agent. I as	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statutes.	• • •		
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE: I	Registered Agent signature requi	ired when reinstating) DATE		— , l
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	YANOFSKY, ROBERT		1.2 NAME .			
STREET ADDRESS	4550 CASPER COURT		1.3 STREET ADDRESS			ļ
CITY-ST-ZIP	HOLLYWOOD FL.		1.4 CITY-ST-ZIP			
TITLE	TIOLET WOOD I C	☐ DELETE	2.1 TITLE		Change	Addition
NAME	· .	•	2.2 NAME			i
STREET ADDRESS			2.3 STREET ADDRESS			}
			2. 4 CITY+ST+ZIP			
-CITY-ST-ZIP -	<u> </u>	DELETE	3.1 TITLE	part of the second of the seco	Change	Addition
NAME		_	3.2 NAME			l
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE	<u>.</u>	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TTTLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS	•		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

CITY-ST-ZIP 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 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 on a partitachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: X

STREET ADDRESS