

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90049 003 ***150.00

DOCUMENT # 628559

1. Entity Name

CRAIN ENGINEERING COMPANY, INC.

Principal Place of Business

Mailing Address

3600 PARK CENTRAL BLVD., NORTH
~~STE. 3635~~
POMPANO BEACH FL 33064
US

3600 PARK CENTRAL BLVD., NORTH
~~STE. 3635~~
POMPANO BEACH FL 33064
US

00065140



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

STE. 3635

Suite, Apt. #, etc.

STE. 3635

City & State

City & State

4. FEI Number

59-1981577

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANIELS, RICHARD
241 SEVILLA AVE.
PENTHOUSE TWO
CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PS	PETROCELLI, GEORGE M	2361 NW 30TH ST	BOCA RATON FL 33431				
VT	MCVAY, JOSEPH K	3225 CRAYTON RD	NAPLES FL 34102				
VP	CILCIUS, ALFRED	44 YACHT CLUB DR., #309	NORTH PALM BEACH FL 33408				

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George M. Petrocelli, Pres. 4/9/01 **GEORGE M. PETROCELLI, PRES.** 954-917-0411
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR12E034 (10/00)