2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

630639

1. Entity Name

FRASER ENGINEERING AND TESTING, INC.

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FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90527 007 ***150.00

Principal Plac 3504 INDUSTR FT PIERCE FL	RIAL 33RD ST	Mailing Address 3504 INDUSTRIAL 33RD ST FT PIERCE FL 34946-8641									
2. Principal P	lace of Business	3. Mailing Address					i i ga ni s diliga inin dinin diliga ining i	THE BUBBLE THE	i Britis Biblis Bi	IBIN ONBIN NOON	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHĘCK HERE IF MAKING CHANGES					
City & State	9	City & State			4. F	4. FEI Number 59-2007264 Applie Not A					
Zip	Country	Zip		Cour	Country		5. Certificate of Status Desired \$8. Fee			3.75 Additional e Required	
	6. Name and Address of Curren	Registere	ed Agent			7,_N	Name and Address of New Reg	stered Ag	ent -		
	ing in the second of the secon		 		Name						
-	Alexander H., P.E. Jstrial 33rd street				Street Add	dress (P.O. B	lox Number is Not Acceptable)				
ft Pierci	E FL 33450				ļ						
<u>.</u>					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. I am familiar with, and accept											
the obligations of registered agent.*											
SIGNATURE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						:	Election Campaign Finant Trust Fund Contribution.	cing		0 May Be to Fees	
10.	OFFICERS AND	DIRECTO	RS	. 11.		AD	DOITIONS/CHANGES TO OFFICE	RS AND D	IRECTORS	S IN 11	
TITLE .	PD		☐ Delete	TITU	E			[Change	☐ Addition	
NAMÉ	FRASER, ALEXANDER H			NAM	. ,					,	
STREET ADDRESS CITY-ST-ZIP	1465 PELICAN LANE VERO BEACH FL				ET ADDRESS -ST-ZIP		•				
TITLE	DV		☐ Delete	TITL	<u> </u>				Change	☐ Addition	
NAME	WEBB, DAVID E		LI Delete	NAM			•	(Onange		
STREET ADDRESS	415 35TH AVE.			STRE	ET ADDRESS						
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NAME STREET ADDRESS	FRASER, MARTHA J			NAM	E ET ADDRESS						
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CITY-ST-ZIP	<u> </u>				-ST-ZIP						
12 Thereby o	artify that the information cumplied wit	h tiese filina	dose not qualify for	the eve	motion etator	d in Section 1	110 07/3\(ii) Florida Statutos I fui	ther certifi	that the in	formation	

2. I hereby certify that the information supplied with the 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 effort as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

A 3 CONTROL OF THE PLANE OF SIGNING OFFICER OR DIRECTOR

4/22/03

772-461-7508

Date

Daytime Phone #

R2F034 (10/0)