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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 646997

LBS ENGINEERING, INC.

Principal Place of Business 320 LINCOLN STREET

Mailing Address

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90048 011 ***150.00



1320 LINCOLN STREET OLLYWOOD FL 33019 HOLLYWOOD FL 33019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/03/1979 4. FEI Number Applied For . Principal Place of Business 2a. Mailing Address 59-1967792 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes the current year Intangible ⊠No 30 Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BURICK, STEVEN Street Address (P.O. Box Number is Not Acceptable) 1320 LINCOLN STREET HOLLYWOOD FL 33019 83 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 Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE πE CR2E034 **BURICK, STEVEN** 1.2 NAME IAME 1320 LINCOLN ST. 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZiP CITY-ST-ZIP [] DELETE ☐ Change ☐ Addition 2.1 TITLE TITLE **BURICK, WALLY GWENN** 2.2 NAME IAME 1320 LINCOLN ST 2.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 3.1 TITLE Change ☐ Addition TITLE ACOUSTANT AND TO THE NAME THE TREE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE TILE 4, 2 NAME VAME 4.3 STREET ADDRESS TREET ADDRESS CITY-ST-ZIP 4,4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITI F 5.2 NAME VAME 5.3 STREET ADDRESS STREET ADDRESS ΣΠΥ-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE 6.1 TITLE ☐ Change Addition MT E 1824 (86) 113 21 6.2 NAME VAME Minney L 6.3 STREET ADDRESS STREET ADDRESS 规数设计 方面 CITY-ST-ZIP 6.4 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, or on an attachment with an address, with all other like empowered.

LESBORIETURE REQUESTED BURICK