## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## 659174 DOCUMENT #

1. Entity Name



**FILED** Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90193 031 \*\*\*150.00

ENGINEER	RING SPE	ECIALIS	TS, INC.												
Principal Place of Business 3773 CENTRAL AVER STE. 020 ST. PETERSBURG FL 33713  2. Principal Place of Business				Mailing Address 3773 CENTRAL AVER., STE. 020 ST. PETERSBURG FL 33713  3. Mailing Address					CHECK HERE IF MAKING CHANGES						
Suite, Apt. #, etc.				Suite, Apt. #, etc.											
City & State				City & State				4	4. FEI Number 59-1979405				-	plied For t Applicable	
Zip Country			,	Zip		Cour	Country		. Certificate of	Status Desired			<b>75</b> Add Require		
	6 Name	and Addr	ess of Current Re	eaistere	ed Agent	٠		7	Name and A	ddress of New	Register	ed Ager	ıt		
							Name								
WINEBRENNER, JACK M. 3773 CENTRAL AVE.							Street Ad	dress (P.O.	. Box Number	s Not Acceptab	le)		- 117		
ST. PETES	BURG FL 3	3713													
							City				F	FL │	Zip Cod	е	
	named entity			he purp	ose of changing its	register	ed office or r	egistered a	agent, or both,	in the State of F	lorida. 1	am fami	iar with,	and accept	
a obligat	ione or region	olou ugan	•						1						
SIGNATURE.	Cit based	er writted par	e of registered agent and	d title if one	dicable (NOT	F. Ragietara	ed Agent signature	a required whe	n reinstation)	<u> </u>	DA <sup>*</sup>	ΓE		<del></del>	
	Signature, typed	or printed nam	e or registered agent and	o title it app	incable. (NO)	L. negistere	ad Agent algridation	a required wind	ar rear state ing y			· <del>-</del>			ł
After		3 Fee wi	li be \$550.00	-						tion Campaign F Fund Contributi				<b>0</b> May Be I to Fees	
	C Payable to		Department of S			44			ADDITIONS 4C	HANGES TO OF	EICEDO :	AND DIE	ECTOR	C IN 11	ļ
10.	In-m	(	OFFICERS AND D	IRECTO		11.			ADDITIONS/C	HANGES TO UP	FICERS /		Change	Addition	(S)
	PTD	UADD I	ın		☐ Delete	TITL	i					Ц	Ghange	Addition	R2E034 (10/02)
	DALY, RIC 5016 KING		JIT.				EET ADDRESS								1
	NORTH PO						(-ST-ZIP								8
TITLE	v	<i>/</i> (( ) E	·		☐ Delete	TITL	F					П	Change	Addition	R
	DALY, MAI	RGARET .	Δ		L Delete	NAN						_			O
	5016 KING		-W			STR	EET ADDRESS								
	NORTH PO					CITY	Y-ST-ZIP	,							
TITLE		<del>-</del>	TO CALENTERS		☐ Delete	TITL	E -	*******	, <u> </u>	ga <del>naga</del> an rani bin			Change	Addition	7
NAME						NAN	I								
STREET ADDRESS						STR	EET ADDRESS								
CITY-ST-ZIP						CITY	r-ST-ZIP								
TITLE					☐ Delete	TITL	E			· ·			Change	☐ Addition	
NAME						NAN	NE								
STREET ADDRESS							EET ADDRESS								
CITY-ST-ZIP						CITY	/-ST-ZIP								}
TITLE					☐ Delete	TITL	.E						Change	☐ Addition	].
NAME	ĺ					NAM									
STREET ADDRESS						- 1	EET ADDRESS								{
CITY-ST-ZIP						CIT	Y-ST-ZIP								1

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like amprovered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

RI CHARD J DALY

2/19/03

727/327-1202

Daytime Phone #

☐ Change

☐ Addition