

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000223

Entity Name: HB ENGINEERING, INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

9841 YORK ALPHA DR. UNIT D
NORTH ROYALTON, OH 441333514

New Principal Place of Business:

9841 YORK ALPHA DR.
UNIT D
NORTH ROYALTON, OH 441333514

Current Mailing Address:

9841 YORK ALPHA DR. UNIT D
NORTH ROYALTON, OH 441333514

New Mailing Address:

9841 YORK ALPHA DR.
UNIT D
NORTH ROYALTON, OH 441333514

FEI Number: 34-1557803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, DAVID N ESQ
AGENTS AND CORPORATIONS, INC.
773 4TH AVENUE N., STE. E
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HABIB, IKE W
Address: 9841 YORK ALPHA DR. UNIT D
City-St-Zip: NORTH ROYALTON, OH 441333514

Title: VP () Delete
Name: MARSH, MIKE
Address: 9841 YORK ALPHA DR. UNIT D
City-St-Zip: NORTH ROYALTON, OH 441333514

Title: PRES () Delete
Name: HABIB, IKE W PE
Address: 9841 YORK ALPHA DR. UNIT D
City-St-Zip: NORTH ROYALTON, OH 441333514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IKE HABIB

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date