FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Feb 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name F67603 (3)TECTON ENGINEERING CORPORATION Principal Place of Business Mailing Address 1600 NW 2ND AVE. 1600 NW 2ND AVE. **STE 18 STE 18 BOCA RATON FL 33432** DO NOT WRITE IN THIS SPACE BOCA RATON FL 33432 3. Date Incorporated or Qualified 02/10/1982 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2161090 Not Applicable 21 26 Suite Apl # etc Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SUTTON, JOHN O. P.A. 2655 LEJEUNE ROAD, PENTHOUSE II Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 84 City Zip Code 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 little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1,1 TITLE Change TITLE CHUNDI, REDDY 1.2 NAME NAME 1600 NW 2ND AVENUE STE 18 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CfTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CitY-ST-ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE Change 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

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 supplimental 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 intractiment with an orderess.

SIGNATURE:

2. 4-98 561-368-7299

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6 3 STREET ADDRESS

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

Change

Addition