

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000005065  
1. Corporation Name  
PCA ENGINEERING, INC.

Principal Place of Business: 177 ROYAL AVE, HAWTHORNE NJ 07507-9227  
Mailing Address: PO BOX 227, HAWTHORNE NJ 07507-9227

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT -6 PM 12:09



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	
21 430 Montclair Ave		26 430 Montclair Ave		10/18/1995	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 Pompton Lakes, NJ		28 Pompton Lakes, NJ		22-1688452	
24 07442		29 07442		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution	
				<input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
				7. This corporation owes the current year intangible personal property.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PHILLIPS, WALTER 543 59TH WAY S. ST PETERSBURG FL 33707				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DREYMAN, EDGAR W	1.2 NAME	President Dan Kogut
STREET ADDRESS	505 FRANKLIN TURNPIKE, UNIT 1	1.3 STREET ADDRESS	835 South Main St.
CITY-ST-ZIP	ALLENDALE NJ 07401	1.4 CITY-ST-ZIP	Waterbury, CT 06706
TITLE	VCP	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MADDEN, VERNON L	2.2 NAME	Vice-President Ruechel, John
STREET ADDRESS	3C BROOKSIDE HEIGHTS	2.3 STREET ADDRESS	39 Orchard Street
CITY-ST-ZIP	WANAUKE NJ 07465	2.4 CITY-ST-ZIP	Hamburg, NJ 07419
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTGOMERY, RICHARD H	3.2 NAME	
STREET ADDRESS	25 HOMESTEAD DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	YARDLEY PA 19067	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOROZYNSKI, DENISE	4.2 NAME	
STREET ADDRESS	237B GRAND AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD NJ	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COUGHLIN, DAVID J	5.2 NAME	
STREET ADDRESS	4 DORCHESTER DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	TALLMAN NY 10982	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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 treasurer 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.

SIGNATURE: [Signature] REQUIRED 9-14-99 973 616-4501  
Date Daytime Phone #

CR2E034 (5/89)