

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002319

FILED
Jan 03, 2007
Secretary of State

Entity Name: SHOOSHANIAN ENGINEERING ASSOCIATES, INC.

Current Principal Place of Business:

88 BLACK FALCON AVENUE
STE 210
BOSTON, MA 02210 US

New Principal Place of Business:

Current Mailing Address:

88 BLACK FALCON AVENUE
STE 210
BOSTON, MA 02210 US

New Mailing Address:

FEI Number: 04-2461926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: GRACILIERI, ROBERT A P.E.
Address: 88 BLACK FLACON AVE STE 210
City-St-Zip: BOSTON, MA 02210

Title: STVD () Delete
Name: RITCHIE, STEPHEN J
Address: 88 BLACK FALCON AVE STE 210
City-St-Zip: BOSTON, MA 02210

Title: V () Delete
Name: FLAHERTY, ROBERT J III
Address: 88 BLACK FALCON AVENUE SUITE 210
City-St-Zip: BOSTON, MA 02210

Title: V () Delete
Name: BROWN, MICHAEL
Address: 88 BLACK FALCON AVENUE SUITE 210
City-St-Zip: BOSTON, MA 02210

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A. GRACILIERI, PE

PD

01/03/2007

Electronic Signature of Signing Officer or Director

Date