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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000000847

BEHRENT ENGINEERING COMPANY

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90016 033 ***150.00



Principal Place of Business Mailing Address						I BANDE ANDREI WARREN WARREN WARREN	VIII QUIU I IIII 1	
.j.	FRONTAGE ROAD	11455 W. 1-70 N. FRONTAGE ROAD WHEAT RIDGE CO 80033		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporat	ed or Qualifed		
					02/12/1998			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			plied For
21		26		84-0516112			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Sta	atus Desired	\$8.75 A		
City & State		City & State		6. Election Campa	-		May Be	
23		28	0		Trust Fund Con	tribution	Added t	o Fees
Zip 24	Country 25	Zip Country 29 30		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No				
	9. Name and Address of Curren	t Registered Agent			10. Name and Add	iress of New Registered	Agent	
			81	Name				1
	CORPORATION SYSTEM		82	Street A	ddress (P.O. Box Number	is Not Acceptable)		
1200 SOUTH PINE ISLAND ROAD				Gudour				
PLAI	NTATION FL 33324	The second state of the second	, 83					
			84	City		, FL	85 Zip (Code
office or I	to the provisions of Sections 607.050 registered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was autho	nzed by	the corpor	orporation submits this station's board of directors.	tement for the purpose of	f changing its	registered gistered
SIGNATURE	٠,							}
	Signature, typed or printed name of registered ager			nt signature req	pured when reinstating)	DATE	ND DIDECTO	IPS (N 12
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CH/	ANGES TO OFFICERS A	Change	Addition
TITLE	SHELANDER, TERRENCE F	_ Decert	1.2 NAME				– v	-
NAME			_	TADDRESS				
STREET ADDRESS	ARVADA CO		1.4 CITY-S					ľ
CITY-ST-ZIP TITLE	V	☐ DELETE	2.1 TITLE	1-21			Change	Addition
NAME	LAMAN, RICHARD	_	2.2 NAME					}
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	LITTLETON CO_	[2. 4 CITY-S	1				ľ
TITLE	S		3.1 TITLE	,	D		- X_) Change	Addition
NAME	BAUMER, ROBERT	1	3.2 NAME		Baumer, Rob	ert		
STREET ADDRESS			3.3 STREET	T ADDRESS	9735 Jellis	on Street		
CITY-ST-ZIP	WESTMINSTER CO		3.4. CITY- S	ST-ZIP	Westminster	c, co		_
TITLE	T	☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME	KULLMAN, JOHN	·	4. 2 NAME					
STREET ADDRESS			4,3 STREE	TADDRESS				
CITY-ST-ZIP	ARVADA CO		4.4 CITY-\$	T-ZIP				
TITLE	D	1	5.1 TITLE		S		X[] Change	☐ Addition
NAME	ARMSTRONG, DOUGLAS		5.2 NAME		Armstrong,	Douglas	-	
STREET ADDRESS	2520 S. DEFRAME STREET		5.3 STREET	TADDRESS		Willa Lane		ļ
CITY-\$T-ZIP	LAKEWOOD CO		5.4 CITY-S	T-ZIP	Evergreen,	CO		
TITLE	D	☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME	DEAN, JOHN		6.2 NAME					
STREET ADDRESS		,		TADDRESS				
~~. ~~ ~~	ALIDODA CO		64 CITY-S	T-71P				1

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 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 attachment with an address, with all other like empowered.

SIGNATURE: June 7 Alla Care Ore Frence F. Shelander

303-940-6868