Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90210 048 \*\*\*150.00

## 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 # **G00780**

1. Corporation Name

POWER & INDUSTRIAL ENGINEERING, INC.

Principal Place of Business Mailing Address					- F IBBEITE BREE ERIEL BEELL (BREE CREEL BREE BIRNE A	fi <b>d</b> it <b>did</b> ic menti me	
512 WATER OAK COURT FT. MEADE FL 33841 US		P. O. DRAWER 9517 WINTER HAVEN FL 33883-9517 US		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 09/21/1982		
2. Principal Pl	ace of Business	2a. Mailing Address	· ·		4. FEI Number - 59-2225367	<b></b>	olied For Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 A	dditional
22	27				5. Certificate of Status Desired	Fee Rec	quired
City & State	ate City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 t Added to	-
Zip ·	p Country Zip 25 29 30			,	This corporation owes the current year Interpretation     Personal Property Tax.		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
3. Hanke allo Address of our ent Registered Agent				Name			
KITCHINGS, WAYNE W			82	Charat Adds	ess (P.O. Box Number is Not Acceptable)		
512 WATER OAK COURT			02	Street Addit	ess (F.O. Box Number 15 Not Noooptable)		
FT. MEADE FL 33841			83				
	•		84	City	FL	85 Zip C	ode
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 title if a blicable. (NOTE: Registered Agent signature required when reinstating)						ND DIRECTOL	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AF	Change	Addition
TITLE	VSD KITCHINGS, NANCY T.		1.1 TITLE 1.2 NAME		·	onengo	
NAME STREET ADDRESS	512 WATER OAK COURT			TADDRESS			İ
CITY-ST-ZIP	FT. MEADE FL		1.4 CITY-S		•		
TITLE			2.1 TITLE			Change	Addition
NAME	KITCHINGS, WAYNE W		2.2 NAME				ľ
STREET ADDRESS	-512 WATER OAK COURT	والمحارب المسادات المناجع الرامج	2.3 STREE	TADDRESS -	· -:		
CITY-ST-ZIP	FT. MEADE FL		2. 4 CITY-5	ST-ZIP		Change	Addition
TITLE	•		3.1 TITLE		•	[_] Citaliye	
NAME			3.2 NAME	T ADDRESS	•		
STREET ADDRESS		t	3.4. CTTY-S		•	•	ļ
CITY-ST-ZIP	•.		4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS	•		Ì
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		<u></u>	
TITLE			5.1 TITLE			Change	Addition
NAME			5.2 NAME	7.40000000			
STREET ADDRESS			5.3 STREE 5.4 CITY-S	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-S 6.1 TITLE	11-215		[] Change	Addition
TITLE .			62 NAME				
NAME STREET ADDRESS				T ADDRESS			f
CITY-ST-ZIP	,		6.4 CITY-S	it-ZIP			

14. I hereby certify that the information supplied with this filling 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 exemption of the receiver of the corporation of the receiver or trustee empowered.

SIGNATURE: