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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

'	1999 🔏	WEIE	DIVISION OF CO	RPORA	110113		05-08-1999	90084 04	14 ***158./	5
DOCUI	MENT # <b>G418</b> 0	)7								
BALANCE ENGINEERING, INC.						ļ				
										ii <b>1</b>
Principal Place of Business Mailing Address							I IMBITAL MAN PAGE MAN AND A		J. 61. 61611 61611 616	,,, e.e., .e.
1304 SUN TERR. CT. 1304 SUN TERR. CT.										
W. PALM BCH, FL 33403-1193 W. PALM BCH, FL 33403-1193				}			DO NOT WO	TC 141 TI 110	CDACE	
						-	DO NOT WR  3. Date Incorporated or Qualifed		SPACE	
						ļ	06/02/1983			ļ
Principal Place of Business     2a. Mailing Address							4. FEI Number	<del></del>	App	lied For
2. Frincipal F	ISCA OL DOZINAS2	⊢ <del>-</del> ï	26				65-0135250		<u> </u>	Applicable
Suite, Apt.	# etc.		Suite, Apt. #, etc.					-	\$8.75 Ac	ditional
22	,,,	27	•				5. Certifcate of Status Desired	M	Fee Req	uired
City & State			City & State				6. Election Campaign Financing		\$5.00 N	May Be
23		28	28			-	Trust Fund Contribution		Added to	Fees
Zip	— — — — — — — — — — — — — — — — — — —			Count	У		8. This corporation owes the current year Intangible			ا
24	25	29	30	)			Personal Property Tax.	Di-t		□No
	9. Name and Address of Cur	rrent Registered	Agent	8	1 Nam		0. Name and Address of New	Registered	Agent	
SCA	rinci, Joseph V			Ľ						
1305 SUN TERRACE CT				8	82 Street Address (P.O. Box Number is Not Acceptable)					
WEST PALM BEACH FL 33403			8	3		<del></del>				
				Ľ					- <del></del>	_
				8	1			Fl	85 Zip Co	
office or r	to the provisions of Sections 607. egistered agent, or both, in the St m (amiliar with, and accept the of	ate of Florida Si	ich change was auch	iorizea d	v ine co	ed corpora orporation's	board of directors. I hereby acce	pt the appo	intment as regi	egistered stered
SIGNATURE	Signature, type or printed name or registered	agent are the if applie	able. (NOTE: Re	egistered Ag	ent signatu	ire required wh	en reinstating)	DATE	// /	<u></u>
12.		AND DIRECTO		13.			ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR	
TITLE	PTD		☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	SCARINCI, JOSEPH V.			1.2 NAME						
STREET ADDRESS	1304 SUN TERR. ST.			1.3 STRE	ET ADDRE	ss				
CITY-ST-ZIP	W. PALM BCH. FL			14 CITY						- Addition
TITLE	VD		☐ DELETE	2.1 TITLE					Change	Addition
NAME	SCARINCI, JOSEPH M.			2.2 NAMI						
STREET ADDRESS	3926 BEGONIA STREET				ET ADDRE	SS				
CITY-ST-ZIP	PALM BEACH GARDENS FL	L 33410	□ DELETE	2. 4 CITY			· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
TITLE			☐ DELETE	3.1 TITLE					onunge	
NAME				3.2 NAM	ET ADDRE		•			ļ
STREET ADDRESS						.55				
CITY-ST-ZIP TITLE			☐ DELETE	3.4. CITY 4.1 TITLE					Change	☐ Addition
NAME				4. 2 NAM					<del>-</del>	

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:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

REPORT CONTINUE TO SEPAN. SCARING! THE NAME OF SIGNING OFFICER OR DIRECTOR

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

CR2F034 (11/98)

Change

Change

Addition

Addition

FILED May 08, 1999 8:00 am Secretary of State