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

officer or director of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, or on an attachment with an add

SIGNATURE:

Apr 20 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5)COMMERCIAL ENGINEERING, INC. Principal Place of Business Mailing Address 3927 BAYSHORE BLVD. NE P.O. BOX 7830 ST. PETERSBURG FL 33703 ST. PETERSBURG FL 33734 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1984 2. Principal Place of Business 2a, Mailing Address 4. FEI Numbe Applied For 21 59-2423941 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 29 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARTLEY, TERESA 3927 BAYSHORE BLVD. NE Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33703 83 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TOTA F 1.1 TITLE Change NAME HARTLEY, TERESA M. 1.2 NAME CR2E034 P.O. BOX 7930 (N/A) STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33734 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THTLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

FILED

4-13-98