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

PROFIT CORPORATION ANN JAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretar / of State
DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90052 033 ***158.75

Applied For
Not Applicable

\$8.75 Additional

Fee Required
\$5.00 May Be

| DOCUMENT | # # | 1685 | 4ºK |
|----------|-----|------|-----|

1. Corporation Name

Whitehouse Engineers, Inc.

43

Paraon, Rodolfo O Nelot Cambria Court

Tampa FL 33647

9. Name and Address of Current Registered Agent

| | 7 | , |
|--|-------|---|
| Principal Place of Business 518 N. Tampa St | | Mailing Address |
| 200 Tampa, FL 33602 | | 200 Tampa, FL 33602 |
| 2. Principal Place of Business 21 3018 US Hwy 301 | North | 2a. Mailing Address 26 3018 U5 HNY 301 No. |
| Suite, Apt #, etc. | | Suite, Apt. #, etc. |
| City & State City & State City & State City & State | | City & State |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

| | | Trust Fund Contribution | A | Added to Fe | es |
|-------------|-----------|--|--------------|-------------|----|
| untry US | | 8. This conporation owes the current year Into Personal Property Tax. | angibl Ye | | vo |
| - | | 10. Name and Address of New Registered | Agent | t | |
| 81 | Name C | narles, A. Otero ss (P.O. Box Number is Not Acceptable) U.S. Huy 301 North | | | |
| 83 | il - 1 - | 1.5. Hwy 301 North | | | |
| 84 | City Town | 000 FI | 85 | Zip Code | ia |

5. Certificate of Status Desired

6. Election Campaign Financing

11. Pursuan to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose or changing its 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.

30

| SIGNATURE | | . WOTE D | gistered Agent signature r | required when reinstating) DAI | | |
|----------------|--|----------|----------------------------|---|-----------|------------|
| 12. | Signature, typed or printed name of registered agent at d title if applicate CFFICERS AND DIRECTOR | | gistered Agent signature : | ADDITIONS/CHANGES TO OFFICER | | RS IN 12 |
| TITLE | VP | DELETE | 1 1 TITI E | President | Change | Addition |
| | Paragan Rodolfo C | | 1.2 NAME | charles A. Otero 3018 us Hwy 301 North, S | | • |
| STREET ADDRESS | Paraoan, Rodolfo O 16104 Cambria Ct Tampa FL | | 1.3 STREET ADDRESS | 3018 US HWY 301 North, S | wite 110 | |
| CITY-ST-ZIP | TAMOS FL | | 14 CITY-ST-ZIP | Tumpa FL 331019 | | |
| TITLE | The state of the s | ☐ DELETE | 2.1 TITLE | Secretary sheila Hayes 3018 us thiny 301 North, Sui | ☐ Change | Addition |
| NAME | | , | 2.2 NAME | cheila Hayes | | <i>y y</i> |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | 3018 us Hwy 301 North, Sui | te 110 | |
| CITY-ST-ZIP | | | 2. 4 CITY-ST-ZIP | Tampa, FL 33619 | | |
| TITLE | | ☐ DELETE | 31 TITLE | | Change | Addition |
| NAME | | | 32 NAME | Christopher E. Weddle | | - |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | Christopher E. Weddle 3018 US - Hwy 301 North, | Suite 110 | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | Tampa, FL 33619 | | |
| TITLE | | DELETE | 4.1 TITLE | | Change | Addition |
| NAME | | | 4. 2 NAME | | | |
| STREET ADDRESS | | | 43 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETÉ | 51 TITLE | | Change | ☐ Addition |
| NAME | | | 52 NAME | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | Change | ☐ Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | |
| | | | 64 CITY, ST. 7IP | | | |

14. I hereby certify that the information supplied with his 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 uncer 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: Z

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTO

4/19/99

(813) 621 - 7354

Daytime Phone #

CR2E034 (11/98)