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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

(7)

Principal Place of Business	Mailing Address	
% VAL BERNHARDT 14440 S.W. 21ST STREET DAVIE FL 33325	% VAL BERNHARDT 14440 S.W. 21ST STREET DAVIE FL 33325	
2. Principal Place of Business	2a, Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED Jan 30 1998 8:00am Secretary of State

ENGIN	eered st	ructures & co	omponent	's corpor	ration			***************************************				
					,							
Principal Plac		i	Mailing A									
% VAL BERNHARDT % VAL BERNHARDT 14440 S.W. 21ST STREET 14440 S.W. 21ST STREET												
DAVIE FL 333			DAVIE FL	w. 21\$t stree I. 33325	=1			DO NOT WRIT	E IN THIS S	PACE		
5			0,,,,,					3. Date Incorporated or Qualified	L			
								11/14/1984			İ	
2. Principal P	lace of Busin	ess	2a. Mailin	g Address				4. FEI Number		Ar	oplied For	
21 26						59-2471655		No	ot Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired			Additional			
22			27	State-							equired	
City & State	e		-	City & State				6. Election Campaign Financing	П		May Be	
Zip		Country	28 Zip		Col.	ntry		Trust Fund Contribution			to Fees	
24		25	29		30	,		This corporation owes or has p Personal Property Tax due Jun	_		7 No	
		and Address of Curren		Agent	100			10. Name and Address of New R				
BEI	RNHARDT, \	/AL				81	Name					
	140 S.W. 21					82	Street Addre	ess (P.O. Box Number is Not Accepta	hle)			
DA'	VIE FL 3332	25				٠-	Oliect Addie	sas (F.O. Box Nathber is Not Accepta	DIE)		i	
						83		· · · · · · · · · · · · · · · · · · ·				
•						84	City		FL	85 Zip	Code	
11 Pursuant	to the provision	ons of Sections 607 050	2 and 607 1508	8 Florida Statu	ites, the al	nove	e-named corno	oration submits this statement for the		changing f	ts registered	
office or r	egistered age	ent, or both, in the State	of Florida, Suc	h change was	authorize	d by	the corporation	oration submits this statement for the on's board of directors. I hereby acce	pt the appo	ointment as	registered	
	ını tamıllar wit	n, and accept the obliga	ations or, Section	on 607.0505, F	iorida Stat	utes	i.					
SIGNATURE	Signature, typed o	or printed name of registered age	nt and little if applical	ble. (NO	TE: Registere	i Ager	nt signature require	d when reinstaling)	DATE			
12.		OFFICERS ANI	D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 12	
TITLE	PST			DELETE	1.1 11	TLE				Change	Addition	
NAME		RDT, VAL			1.2 N/	ME						
STREET ADDRESS		W. 21ST STREET			1.3 ST	REET.	ADDRESS					
CITY - ST - ZIP	DAVIE FL	-		I bevere		TY-\$1	T-ZIP					
TITLE				☐ DELETE	2.1 10				1	Change	Addition	
NAME					2.2 N/							
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP				DELETE	2, 4 C 3,1 TI		iT-ZIP			Change	Addition	
NAME I				اعتبرت ا	3.2 NA					Unange	T'''I VOOIIIO!!	
STREET ADDRESS						_	ADDRESS					
					3.4. C						ł	
CITY - ST - ZIP TITLE				DELETE	4,1 TI		1-71-			Change	Addition	
NAME					4, 2 N		}		•			
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					4.4 CI							
TITLE	<u> </u>			DELETE	5.1 77		1-21			Change	Addition	
NAME					5.2 NA	ME	}			_	1	
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CI		ł.					
TITLE				DELETE	6.1 TI					Change	Addition	
NAME	l				6.2 NA	ME	Į.				}	
STREET ADDRESS					6.3 ST	REET	ADDRESS				ļ	
CITY - ST - ZIP					6.4 Cl						_	
14. I hereby o	ertify that the	information supplied w	ith this filing do	es not qualify	for the exe	mpt	ion stated in S	Section 119.07(3)(i), Florida Statutes.	further cer	tify that the	information	

signature shall have the same legal effect as it made under oath; that I am ar t as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

1.24-98