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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

i. Corporaro	MENT # H4082 (ENGINEERING, INC.	6 (0)				F 1177 ALI BILL BARR BARR ANN ANN ANN ANN ANN ANN ANN ANN ANN		ARRI BIDII ALIRI ARRI 1884
Principal Plac	e of Business	Mailing Address	Mailing Address					
990 BENNETT AVENUE WINTER PARK FL 32789-2216		990 BENNETT AVENUE WINTER PARK FL 32789-2216						
						3. Date Incorporated or Qualified 01/31/1985		Pate of Last Report /02/1996
·	lace of Business	2a. Mailing Address	} —¬¬			4. FEI Number		Applied For
Suite, Apt	#. etc.	Suite, Apt. #, etc.				59-2494673	~	Not Applicable \$8.75 Additional
22		27	ļ			5. Certificate of Status Desired	X	Fee Required
City & Stat	ie .	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	30 Cour	ntry			Yes	□ No
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered	Agent
GRANT, GEORGE W. 221 GRAHAM ROAD								
FERN PARK FL 32730				82	Street Addr	ress (P.O. Box Number is Not Acceptal	ole)	
1 611	IT I MIKE TE VELOV		ľ	83				
			}	84	City		· · · · · · · · ·	85 Zip Code
							FL	-
office or r agent. La	to the provisions of sections 607/05 registered agent, or both, in the Stat am familiar with, and accept the oblig	oz and 607, 1506, Florida Statut e of Florida. Such change was a gations of, Section 607,0505, Flo	authorized orida Statu	l by ites.	the corporal	poration submits this statement for the lation's board of directors. I hereby acce	pt the ap	pointment as registered
SIGNATURE	Supposition typic to be printed narve of registered as	gent and little if applicable. (NOT		Ager	nl signature requir	red when reinstating)	DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AN	
101:6	PST Grant, George W.	DELETE	TE 1.1 TITLE 1.2 NAME					Change Addition
NAME STREET ADORESS	221 GRAHAM ROAD				ADDRESS			
CHY-S1-7-P	FERN PARK FL		14 CIT					
T-TLE		DELETE						Change Addition
NAME			2.2 NA	ME				į
STREET ADERESS			23 ST	REET /	address			
City St- ZiP	T Dr. Per			2. 4 CITY - ST - ZIP		·		
THILE		DELETE	3.1 TiT					Change Addition
NAME CIDICEL ADDIGECT			3.2 NA	_	ADDDECC			
STREET ADDRESS CITY - S* - ZIP	•		3.4. CI		ADDRESS			
HILE		DELETE	4.1 TIT		1-51			☐ Change ☐ Addition
NAMi		_	4. 2 NA					
STREET ADDRESS			4.3 ST	REET A	ADDRESS			Ì
CiTy - S1 - ZIP			4.4 CIT	Y-S1	ZIP			
THLE		☐ DELETE	5.1 TiT	LE				Change Addition
NAME			5.2 NA	ME				į
STREET ADDRESS					ADORESS			
CITY - S1 - ZIP		חרורזר	5 4 CIT		- ZIP			Change Addition
THILE	Ī	☐ DELETE	6.1 TIT	LE	1			Change Addition

14. It do 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 eath; that I am an officer or director of the director or the receiver or trustee empowered to execute this report as required by Chapte 607, Florida Statutes; and that my name appears in Block 12 or Block 12 in changed, or on an attachment with an address.

64 CITY-ST-ZIP

62 NAME 63 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-Z-P

GUATURE AND TYPES ON PHINTED HAME OF SIGNING OFFICER OR DIRECTOR

277 2/25/97

FILED

Mar 03 1997 8:00am

Secretary of State