2000 UNIFORM BUSINESS REPORT (UBR) **FILED DOCUMENT # J60550** 1. Entity Name PROFESSIONAL ENGINEERING & INSPECTION COMPANY, I Principal Place of Business Mailing Address 4350 WEST SUNRISE BLVD 4350 W SUNRISE BLVD SUITE 103-D SUITE 103-D PLANTATION FL 33313-6709 PLANTATION FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number City & State City & State 59-2784924 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DICKERSON, WRIGHT Street Address (P.O. Box Number is Not Acceptable) 4350 W. SUNRISE BLVD. STE 103 **PLANTATION FL 33313** Zip Code City FŁ 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees TIT NA. ST CIT TIT NAI ST CIT

Feb 26, 2000 8:00 am Secretary of State

02-26-2000 90014 021 ***150.00



Applied For

Not Applicable

(See Ciller	ia Oil Dack)		Make Check Fa	iyable to bepartilleni	UI State			
11. OFFICERS AND DIRECTORS			12.	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	DP		☐ Delete	TITLE			Change	Addition
NAME	ELZWEIG, GARY H.			NAME				
STREET ADDRESS	P.O. BOX 15991			STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL			CITY-ST-ZIP				
TITLE	DCST		☐ Delete	TITLE			Change	☐ Addition
NAME ->	DICKERSON, WRIGHT			NAME				ļ
STREET ADDRESS	14366 TWISTED BRANC)H BLVD.		STREET ADDRESS				
CITY-ST-ZIP	POWAY CA			CITY-ST-ZIP				
TITLE	T		≥ Delete	TITLE	T		☐ Change	X Addition
NAME	WAIT, JAMES			NAME	Josep1	h Wasilewski		l
STREET ADDRESS	7895 CONVOY CT #18			STREET ADDRESS		ewman Springs Ro	aď	
CITY-ST-ZIP	SAN DIEGO CA 92111			CITY-ST-ZIP	Lincre	oft, New Jersey	_07738	
TITLE	S		☐ Delete	TITLE		,	☐ Change	☐ Addition
NAME	DIERKES, DAWN			NAME				
STREET ADDRESS	256 CODRINGTON DR			STREET ADDRESS				
CITY-ST-ZIP	LAUDERDALE-BY-THE-S	EA FL 3330	8	CITY-ST-ZIP				
TITLE	EV		☐ Defete	TITLE			🔀 Change	Addition
NAME	ZARCO, MARY J			NAME	4859 1	N.W. 124th Way)
STREET ADDRESS	11921 SW 9TH MANOR			STREET ADDRESS	Coral	Springs, Florida	a 33076	5
CITY-ST-ZIP	DAVIE FL 33325			CITY-ST-ZIP				
TITLE			☐ Delete	TITLÉ			Change	Addition
NAME				NAME				ļ
Street address				STREET ADDRESS	1			1
CITY-ST-ZIP				CITY-ST-ZIP				
indicated of the cor	on this report or supplement:	al report is tru stee emoowe	e and accurate and the red to execute this re	nat my signature shall h port as required by Cha	ave the same.	119.07(3)(i), Florida Statutes. I furthe legal effect as if made under oath; th da Statutes; and that my name appe	at I am an officer ars in Block 11 or	or director Block 12 if
CICNIAT	TIDE.	. 1		11/2		2-9-2000 954	-581-200)8

Daytime Phone #

Gary Elzweig - President

SIGNATURE AND TYPER OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR