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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J84973** (3)

1. Corporation Name

FLORIDA ENGINEERING, INC.



Principal Place of Business

**877 N.W. 61ST ST.
FT. LAUDERDALE FL 33309**

Mailing Address

**877 N.W. 61ST ST.
FT. LAUDERDALE FL 33309**

3. Date Incorporated or Qualified

07/30/1987

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**POLTORACK, RONALD D.
412 S E 18TH STREET
100 SOUTHEAST 2ND STREET, STE 2300
FT LAUDERDALE FL 33316**

81

Name

JOSEPH M. CVELBAR

82

Street Address (P.O. Box Number is Not Acceptable)

319 CLEMATIS STREET,

83

Suite

211

84

City

WEST PALM BEACH

FL

85

Zip Code

33401

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 person authorized to file this report

JOSEPH M. CVELBAR

4/30/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DPTS
MORENO, ALEJANDRO**
STREET ADDRESS **4901 N OCEAN BLVD, #1201**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☒ DELETE

NAME **VP
SOTO, JUAN G**
STREET ADDRESS **1001 N OCEAN BLVD DR**
CITY-ST-ZIP **DADE FL**

TITLE ☒ DELETE

NAME **MOORE, RICHARD**
STREET ADDRESS **404 NW 10TH AVE**
CITY-ST-ZIP **DEERFIELD BEACH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Block 12 or Block 13 if changed, in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)