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Feb 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J94711 (5)

1. Corporation Name

ALLTERRA ENGINEERING & TESTING, INC.

Principal Place of Business

% CAROL DREW
836 INDIANTOWN ROAD
JUPITER FL 33458

Mailing Address

% CAROL DREW
836 INDIANTOWN ROAD
JUPITER FL 33458-7501



3. Date Incorporated or Qualified

09/28/1987

3a. Date of Last Report

04/16/1996

2. Principal Place of Business

21 850 W. Indiantown Road

Suite, Apt. #, etc.

22 Suite A

23 City & State
Jupiter, Florida

24 Zip 33458 Country

25

2a. Mailing Address

26 850 W. Indiantown Road

Suite, Apt. #, etc.

27 Suite A

28 City & State
Jupiter, Florida

29 Zip 33458 Country

30

4. FEI Number

65-0032025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

DREW, CAROL
836 INDIANTOWN ROAD
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name

Same

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

850 W. Indiantown Road

83 Suite A

84 City
Jupiter

FL

85 Zip Code
33458

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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME DREW, CAROL
STREET ADDRESS 510 N.E. 22ND AVE.
CITY-ST-ZIP BOYNTON BEACH FL 33435

TITLE VP ☐ DELETE

NAME KARIM-CONRADO ABDEL
STREET ADDRESS 19575 CAROLINA CIRCLE
CITY-ST-ZIP BOCA RATON FL 3434

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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 ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 16835 131st Way North
1.4 CITY-ST-ZIP Jupiter, Florida 33478

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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.

SIGNATURE:

Carol Drew
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-97

(561) 575-0012

Date

Daytime Phone #

0326841

CR2E034 (9/96)