FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

K54051

(3)

CONSTRUCTION & ENGINEERING SERVICES CORPORATION Principal Place of Business Mailing Ardress 1000 SW 9290 AVE								
1030 SW 83RD AVE 10300 186TH COURT SOUTH NORTH LAUDERDALE FL 33068 US		% P. ANTHONY GORDON 10300 186TH COURT SOUTH BOCA RATON FL 33434		Date incorporated or Qualified				
					12/28/1988			•
		2a. Mailing Address			4. FEI Number	L	·	lied For
21	Suite Apt. #, etc. Suite Apt. #, etc.				65-0097130		Not	Applicable
2	27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Gity & State		City & State			6. Election Campaign Financing		\$5.00 N	May Be
Z _I p	Country	28			Trust Fund Contribution		Added to	
25 29		Ζφ [26]	Country 30		This corporation has liability for intangible tax under s 199.032, Florida Statutes			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
		<u></u>		31 Nanie		-CBISTOLEG N	gent	
BLAIR, PATRICK			ļ.	32 Street Add	(CO Do Namba is Nad			
	V 83RD AVENUE		[STEEL AUC	iress (F.O. Box No hoer is Not Acceptat	ess (P.O. Box Number is Not Acceptable)		
North (LAUDERDALE FL 33068		[1	33				
			<u> </u>	34 City			85 Zip Co	
	o the provisions of Sections 607.0502 and	. <u></u>		/		FL		
familiar with	ed agent, or both, in the State of Florida n, and accept the obligations of, Section	607.0505, Florida Statute	zed by the od S.	ирохаtion's boa - gert synather requir	ard of directors. Thereby accept the app	ointment as r	egistered age	ent. I am
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFF	ICERS AND (DIRECTORS	IN 12
TITLE	D	☐ DELETE	1 1 1 1	f			Change 🗀	Addition
NAMÉ	GORDON, P. ANTHONY		1.2 NAM	16				
STREET ADDRESS	10300 186TH COURT SOUTH		13SIR	EET ADDRESS				
CITY-ST-ZIP TITLE	BOCA RATON FL	F3.00.07		- SI - ZIP				
NAME	NEMBHARD, CLAUDE S.	[] DELETE	2 1 1 11				Change [] Addition
STREET ADDRESS	10300 186TH COURT SOUTH		2.2 NAM					
CITY-ST-ZIP	BOCA RATON FL			EFT ADDRESS				
THLE	DOON IVIION I E	□ DELETE	3 1 THU	- \$1 - ZIP	·		Change 🖵	7. Addition —
NAME			3.2 NAM			U	j Charige 📥	
STREET ADDRESS				ELL ADDRESS				
CITY-ST-ZIP				-S1 ZiP				
TITLE		☐ DELETE	4 1 TiTL				Change [] Addition
NAME			4.2 NAV	E				-
STREET ADDRESS			4.3 STRI	FF ADDRESS				
CITY - ST - ZIP			4.4 CITY	- ST - 20F				
TITLE		☐ DELETE	5 1 TITL	E	-		Change] Addition
NAME			5.2 NAM					
STREET ADDRESS			5.3.\$1PE	ET ADDRESS				
DITY+ST ZIP TITLE	·	[DELETE	5.4 CHY					
NAME		☐ D€LETE	6 1 lill		•		Change [] Add-tion
STREET ADDRESS			6.2 NAM	ľ				i
OTY-ST-ZIP				EL ADDRESS				
	certify that the information supplied with	this filing is voluntarily furr	640-TY hished and do	-SEZIE Sos not auglés t	for the exemption stated in Section 119	07/20/IA Elect	da Ordalas I	f. other

cert by 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 Onapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Slankhon SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 (407) 488 9759