

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90152 022 \*\*\*150.00

<b>DOCUMENT # K67408</b> 1. Entity Name <b>REBAR ENGINEERING, INC.</b>					
Principal Place of Business <b>6361 SOUTHWEST 1ST STREET PLANTATION, FL 33317</b>			Mailing Address <b>6361 SOUTHWEST 1ST STREET PLANTATION, FL 33317</b>		
2. Principal Place of Business - No P.O. Box # <b>2256 NW 29 Street</b>		3. Mailing Address <b>2256 NW 29 Street</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Oakland Park, FL</b>		City & State <b>Oakland Park, FL</b>		4. FEI Number <b>65-0121951</b>	
Zip <b>33311</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>33311</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GONZALEZ, WENDY L 2256 NW 29 ST FORT LAUDERDALE, FL 33311</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>Wendy L Gonzalez</i></u> <span style="float: right;">4/17/08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP WILLIAMS, ROBERT L. <input checked="" type="checkbox"/> Delete 6361 SW 1ST ST. PLANTATION, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP WILLIAMS, JEAN A. <input checked="" type="checkbox"/> Delete 6361 SW 1ST ST PLANTATION, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GONZALEZ, WENDY L <input type="checkbox"/> Delete 2256 NW 29 ST OAKLAND PARK, FL 33311		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Wendy L Gonzalez</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/17/08 954-739-7711 <small>Date Daytime Phone #</small>		