FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION



FLORIDA DEPARTMENT OF STATE

	IAL REPOR	DIVI	Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
	MENT #	K79502	((6)						
SHORE ENGINEERS INC.										h 448114481
										
Principal Place			Mailing Addre					r Labrifrit ant 1841a (Als. Altri Antio 1191 Alsti Ar	111 616 11 616 11 6161	I BIBIT LABI
3838 TAMIAMI TR N 3838 TAMIAMI TR N STE #408 STE #408										
NAPLES FL 34103 US				NAPLES FL 34103 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
								04/12/1989		
	ace of Business		2a. Mailing Ad	dress				4. FEI Number		oplied For of Applicable
Suite, Apt 4	#, etc		Suite, Apt.	#, etc.	·			65-0120226	\$8.75	
22			27						Fee Re	
City & State	,		City & State	в				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	, , ,	Country	Z _{ip}		Countr	У		8. This corporation owes or has paid the c	urrent year Int	angible
24	o Name and	Address of Current P	29 tegistered Agent		30			Personal Property Tax due June 30. 10. Name and Address of New Registere] No
OW	LIAEI, BAHRAI		ogisto od Agott	`	81	ĪN	lame	ID. Hama allo realizes of for higherets		
3838 TAMIAMI TR N						2 8	treet Add	dress (P.O. Box Number is Not Acceptable)		
STE #408					83	┷-				
NAF	PLES FL 34103	3								
						1	ity	F		Code
11. Pursuant to	o the provisions	of Sections 607.0502 a or both, in the State of	rid 607.1508, Flo Florida, Such cha	rida Statutes ange was au	s, the abov	/e-na	amed cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing it	s registered registered
	n familiar with, a	ind accept the obligation	ns of, Section 60	7.0505, Flor	ida Statute	S.		· · · · · · · · · · · · · · · · · · ·		
SIGNATURE	Signature, typind or pri	inted name of registered agent a	nd title II application	(NOTE	Registered Ag	jent si	griature requ	uired when reinstaling) DATE		
12.		OFFICERS AND D		DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AF		RS IN 12
TITLE .	dp Owliaei, b	AHRAM	LJ	DECETE	1.1 TITLE 1.2 NAME		-		Change	L MODITION
STREET ADDRESS	270 MONTE				1.3 STREE		RESS			
CITY+ST-ZIP	NAPLES FL				1.4 CITY-	S1-2	Р			
TITLE			لہا	DELETE	21 TITLE				Change	Addition (
NAME STREET ADDRESS					2.2 NAME 2.3 STREE		RESS	₩*		
CITY-ST-ZIP					2. 4 CITY-		l			
TITLE				DELETE	3.1 TITLE				Change	Addition
NAME					3.2 NAME 3.3 STREE		proc.			1
STREET ADDRESS CITY-ST-ZIP					3.4. CITY-					
TITLE		/		DELETE	4.1 TITLE				Change	Addition
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CITY-ST-ZIP TITLE		· 		DELETE	4.4 City -: 5.1 Title		<u> </u>		Change	Addition
NAME					5.2 NAME				•	
STREET ADDRESS					5.3 STREE	TADO	RESS			Ì
CITY-ST-ZIP				DEL ETE	5.4 CITY-1	ST-21	p			T Appendix
TITLE			L	DELETE	6.1 TITLE		- {		Change	Addition
NAME STREET ADDRESS					6.2 NAME 6.3 STREE		RESS			
CITY-ST-ZIP					6.4 CITY-					

14. Thereby 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:

941-643-6633

FILED

Mar 09 1998 8:00am