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

1996

DOCUMENT #

K82269

(7)

Principal Place 91971 OVE SUITE 21	WATER ENGINEERING & of Business ERSEAS HIGHWAY	DESIGN, INC. Mailing Address P. O. BOX 819 TAVERMER FL 330 US	070				
US		00			3. Date Incorporated or Qualified 04/21/1989	3a. Date of Last Report 01/26/1995	
2. Principal Pk	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		65-0128301	Not Applicable		
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22 DELATE City & State		City & State		S Floation Comparing Emparation	Fee Hequired		
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζφ	Country				8. This corporation has liability fo	r intangible tax under s. 199.032,	
24	25	29	30			s XI No	
	9. Name and Address of Curren	it Hegistered Agent	81	lame	10. Name and Address of New	Hegistered Agent	
GRIER	rson, marilyn						
91971	OVERSEAS HWY.		82 8	treet Addr	ess (P.O. Box Number is Not Accepta	ıble)	
	3OX 109		83				
TAVER	RNIER FL 33070		84				
				City		FL 85 Zip Code urpose of changing its registered office	
SIGNATURE	th, and accept the obligations of, Sect Systems, gred or printed name of registered agent OFFICERS ANI	and title it applicable (f	NOTE Big stored Agent sig	nghide fespiris		DATE FICERS AND DIRECTORS IN 12	
THTLE	DP CONTRACTOR	☐ DELETE	1 1 TIFLE		☐ Change ☐ Addition		
NAME	GRIERSON, WAYNE 91971 OVERSEAS HWY		1.2 NAME				
STREET ADDRESS	TAVERNIER FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				
CHY-ST-ZIP HILE	DVT			lb		Change	
NAME	HOPKINS, RICHARD		2 1 TITLE 2 2 NAME			Change Addition	
STHEET ADDRESS	91971 OVERSEAS HWY.		2.3 STREET ADD	DRESS			
CITY - ST - ZIP	TAVERNIER FL		2.4 CITY-S1-Z				
TITLE	DS DELI		3 1 TIFLE			Change Addition	
NAME	GRIERSON, MARILYN 91971 OVERSEAS HWY.		3.2 NAME				
STREET ADDRESS	TAVERNIER FL.		CA FIBRIZ 8.8	DRESS			
CITY - ST - ZIP			3 4 CITY - ST - Z	IP .			
TITLE NAME	· · · · · · · · · · · · · · · · · · ·		4. 1 TITLE		Change Addition		
STREET ADDRESS			4.2 NAME 4.3 STREET ADD	NDE CC			
C-TY - ST - ZIP			4.5 STREET A.X				
TITLE		DELETE	5 17011	<u>"</u>		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STHEET ADD	DRESS			
C(TY - S1 - 24P			5 4 CITY - ST - Z	IF'			
TITLE		☐ DELETE	6 1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			63 STREET ADD				
14. I do hereb	y certify that the information supplied t	with this filing is voluntarily for	64 CITY - ST - Z rnished and does n		or the exemption stated in Section 11	9.07(3)(k) Florida Statutes I further	
certify that oath; that	t the information indicated on this annu I am an officer or director of the corpo Block 12 or Block 13 if changed, opp	ial report or supplemental an oration or the receiver or trust	inual report is true a lee emipowered to s	ind accura	ite and that my signature shall have th	e same legal effect as if made under	

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

3/1/96 (305)652-4295

;R2E034 (12/95)