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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(5)

JUHN	J. HUSKA	I, P.E., INC.									
Principal Plac	Mailing Add	Mailing Address] I IMMINITE BON (MINT 11040 1001) 08188	4)1 010 11 0 1011	91911 P 811 &11				
C/O JOHN J. RUBKAI 2503 DEL PRADO BOULEVARD. SOUTH. SUITE 510 CAPE CORAL FL 33904 US			2503 DEL F CAPE COR	C/O JOHN R. RUSKAI 2503 DEL PRADO BOULEVARD. SOUTH. SUITE 510 CAPE CORAL FL 33904 US			DO NOT WRITE IN THIS SPACE				
			US				3. Date Incorporated or Qualified				
						·····	06/01/1989				
2. Principal F	Place of Busin	ness	2a. Mailing Address			4. FEI Number		-	pplied For		
21			26				65-0151676			lot Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5, Certificate of Status Desired			Additional lequired	
City & State			City & State			6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country 25		Žip			try		a. This corporation owes or has p	s or has paid the current year Intangible		
24 [25] [29] [29] [29] [29] [29] [29] [29] [29					30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent					
RUSKAI, JOHN J.						31	Name	10, 1141115 4114 1144 114	081010100		
2503 DE L PRADO BOULEVARD, SOUTH SUITE 510 CAPE CORAL FL 33904					8	12	Street Addres	ss (P.O. Box Number is Not Acceptable)			
						3					
					J.	٦)					
					8	4	City		FL	85 Zip	Code
11, Pursuant office or agent. I a SIGNATURE								ration submits this statement for the n's board of directors. I hereby according to the contract of the contra	purpose of ept the app	changing ointment a	its registered s registered
Signature, typed or printed name of registered agent as OFFICERS AND D							i signajure required	ADDITIONS/CHANGES TO OFF		DIBECTO	DC IN 12
TITLÉ	D				13. 11 THTL	F T		ADDITIONS/CHANGES TO OFF	CENS AND	Change	Addition
NAME	_	, JOHN J.	_			1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
STREET ADDRESS	2503 DE	I PRADO ROULEVADO), SOUTH, SUITE 510								
CITY-ST-ZIP		ORAL FL									
TITLE				DELETE	2.1 TITLE					Change	Addition
NAME	KERFOOT, RONALD			2.2 NAME		}					
STREET ADDRESS		EL PRADO BLVD SO, S	TE 510		2.3 STREET ADDRESS		IDDRESS				
CITY-ST-ZIP	****				2. 4 CITY - ST - ZIP		·-	•	··.,		
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STREET ADDRESS						IF .					
OTHER PRODUCTION			TE 510				ODBESS				
CITY, ST. 710	2503 DE	L Prado blvd so, s	TE 510		3.3 STRE	ET A	ODRESS				
CITY-ST-ZIP	2503 DE			T DELETE	3.3 STRE 3.4. CITY	ET #			·	Change	Addition
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14. I 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 officed, or on an attachment with an address

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

TITLE

NAME

STREET ADDRESS

941-458-5544

FILED

May 13 1998 8:00am

Secretary of State