SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT** # 1. Corporation Name (5)PRO-DESIGN ENGINEERING, INC. Principal Place of Business Mailing Address 780 N. SUNCOAST BLVD. P.O. BOX 2580 CRYSTAL RIVER FL 34429 CRYSTAL RIVER FL 34429-2560 3. Date Incorporated or Qualified 3a. Date of Last Report 11/06/1989 04/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEt Number 7655 W. GUIF to LAKE HWY 26 Applied For 59-2979320 Not Applicable SUITE 4 \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing CrySTAL \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAUFFMANN, MARILYN G. 2148 NORTH WATERSEDGE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **CRYSTAL RIVER FL 34429** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TUTLE Change Addition NAME KAUFFMANN, MARILYN G. 1.2 NAME **CR2E034** STREET ADDRESS 2148 N WATERSEDGE DRIVE 13 STREET ADDRESS CITY - ST - ZIP CRYSTAL RIVER FL 14 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-S1-ZIP 2 4 CITY - ST - Z:P TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-ZIP 3.4 CITY-ST-7IP THILE DELETE 41 TIFLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELFTE 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY - ST- ZIP TITLE DELETE 6 1 TITLE Change Addition NAME € 2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exempt on stated in Section 119 07(3)(k). 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 logal effect as if made under oath, that I am an object or director of the corporation or the cod-ver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, origin an attraction with an address

Mann 7-8-96 3525636300

SIGNATURE:

(3/96)