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

**PROFIT CORPORATION** ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	ON ENGINEERING, INC.	<b>+4</b>	(2)					
Principal Place of Business Mailing Address				, ,			ON DIEN SIDN GIRI	I DIOM INO
P. O. BOX 7184 WESLEY CHAPEL FL 33544 US		P. O. BOX 7184 Wesley Chapel Fl 33544 Us				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
						11/14/1989		
2. Principal F	Place of Business	2a. Mailing	2a. Mailing Address			4. FEI Number	Ar	oplied For
1		26				59-2990042	No	ot Applicable
Suite, Apt.		Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Fee Re	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country 25	Zip Co 29 30			Ŋ	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
	g. Name and Address of Cur	rent Registered A	gent	8	1 Name	10. Name and Address of New Registers	d Agent	
	08 CARINA TRACE ISLEY CHAPEL FL 33544				Street A  City	ddress (P.O. Box Number is Not Acceptable)	<b>85</b> Zip	Code
11, Pursuant	to the provisions of Sections 607.0	0502 and 607 1508, ate of Florida Such	Florida Statute	s, the about	ve-named o	orporation submits this statement for the purpose oration's board of directors. I hereby accept the a		
agent. I a	am familiar with, and accept the ob	ligations of, Section	n 607.0505, Floi	rida Statut	es.	, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE	Signature, typed or printed name of registered	apent and little if applicable	(NOTE	Registered A	gent signature ri	equired when reinstating) DATE		
12.		AND DIRECTORS	, , , , , , , , , , , , , , , , , , , ,	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
ITLE	D		DELETE	1,1 10TLE			Change	Addition
IAME	FRICKE, RICHARD T.			1.2 NAM	: ]			
STREET ADORESS	5808 CARINA TRACE			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	WESLEY CHAPEL FL			1.4 CITY	- S1 - ZIP		<del></del> -	
ITLE	ļ		☐ DELETE	21 TITLE	-		Change	Addition
KAME				22 NAMI	1			
STREET ADDRESS	}			2.3 STRE	ET ADDRESS	•		
CITY-ST-ZIP			Louise	2. 4 CITY				14400
ITLE	1		DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAM				
STREET ADDRESS				1	ET ADDRESS			
CITY - ST - ZIP			-	3.4. CITY	-ST-2IP			*

CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 suppliemental 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 cociever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if Changon, or on an attachment that an address.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

54 CITY-ST-ZIP

5.1 TITLE

52 NAME 5.3 STREET ADDRESS

6.1 TITLE

6 2 NAME 6.3 STREET ADDRESS

DELETE

Addition

**FILED** 

Apr 17 1998 8:00am

Secretary of State