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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L85388** **(1)**

1. Corporation Name
F. AND F. ENGINEERING CORPORATION

Principal Place of Business	Mailing Address
~~6450 NW 191 TER~~ ~~MIAMI FL 33015-4710~~	~~6450 NW 191 TER~~ ~~MIAMI FL 33015-4710~~

2. Principal Place of Business	2a. Mailing Address
21 7270 N.W. 12TH. ST	26 7270 N.W. 12TH ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 PH. 1	27 PH. 1
City & State	City & State
23 MIAMI	28 MIAMI
Zip / Country	Zip / Country
24 FL 25 33126	29 FL 30 33126

3. Date Incorporated or Qualified: 07/02/1990
3a. Date of Last Report: 04/02/1996
4. FEI Number: 65-0209034 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FERRER, ORLANDO M. 6450 NW 191 TER MIAMI FL 33015	81 Name: Sidney Z Brodie 82 Street Address (P.O. Box Number is Not Acceptable): 7270 N.W. 12TH. ST. PH 1 83 84 City: MIAMI FL 85 Zip Code: 33126

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE [signature] Sidney Z. Brodie 4/15/97
(signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FERRER, ORLANDO M.	1.2 NAME	
STREET ADDRESS	6450 NW 191 TER	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33015	1.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FERRER, FRANCISCO J. JR	2.2 NAME	
STREET ADDRESS	141 E. 18 ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33012	2.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	3.1 TITLE	S ☐ Change ☐ Addition
NAME	FERRER, WIFREDO A.	3.2 NAME	GABRIEL ALFONSO
STREET ADDRESS	1335 NW. 196 TERR.	3.3 STREET ADDRESS	1414 N.W. 107 AVE, DR. 1
CITY-ST-ZIP	MIAMI FL 33169	3.4 CITY-ST-ZIP	MIAMI, FL. 33172
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 changed, or on an attachment with an address.

SIGNATURE: [signature] President 4/15/97 513-0501 ext 31
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #