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 # L86269 (2) 1. Corporation Name								
HOLMLIN ENGINEERING CORPORATION								
Principal Place of Business Mailing Address						10 1014 01011 01011 014 011 	UII 3 4011 UIAII UUD!	
3208-C E. COLONIAL DR. SUITE 210 ORLANDO FL 32803		SUITE 210	3208-C E. COLONIAL DR. SUITE 210 ORLANDO FL 32803					
ONDANDO F	C 32803	ONLANDO PE S2003			3. Date Incorporated or Qualified 07/09/1990	3a. Date of Last F 06/19/1	'	
2. Principal Pla	ace of Business	2a, Mailing Address	. Mailing Address		4. FEI Number	······································	Applied For	
21		26	O its Anta to the		59-3016754	Not Applicable		
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Required	
City & State			City & State		6. Election Campaign Financing	\$5.0	00 May Be	
Z ip			Country		Trust Fund Contribution		ed to Fees	
24	Country Zip Co				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
HOLMLIN, REX M 3208-C E COLONIAL DR #210			81	Name	dress (P.O. Box Number is Not Acceptable)			
			82	Street Addre				
	DO FL 32803		83					
			84	City		85 Z	ip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a				named coroora	ation submits this statement for the nur	oose of changing its	registered office	
or registere	ed agent, or both, in the State of Fl h, and accept the obligations of S	lorida. Such change was authorize	ed by the corp	oration's board	d of directors. I hereby accept the appoint	pintment as registered	d agent. I am	
SIGNATURE	in and decept the obligations of							
12.			TE: Registered Agent signature required 13.		when reinstating! ADDITIONS/CHANGES TO OFFI	DATE ICERS AND DIRECTO	ORS IN 12	
TITLE	PD DELETE		1. 1 TITLE			☐ Change	☐ Addition	
NAME	HOLMLIN, REX M		1.2 NAME					
STREET ADDRESS	3208C E COLONIAL DR 1	# 210	1.3 STREET ADDRESS					
CHTY-ST-ZIP TITLE			1.4 CITY - S 2. 1 TITLE	ii - ZIP		Change	- Addition	
NAME			2.2 NAME					
STREET ADDRESS		23		ADDRESS				
CITY-ST-ZIP			2.4 CITY - S	I-ZIP			F7 4100	
TULE (DELETE		3. 1 TITLE 3.2 NAME			- Change	Addition	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4 CITY - ST - ZIP					
TITLE		☐ DELETE	4. 1 TITLE			☐ Change	☐ Addition	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET					
CHY-SI-ZIP TITLE		☐ DELETE	4.4 City - 5 5. 1 Title	01748		Change	Addition	
NAME		5.2						
STREET ADDRESS	ESS 5.33		5.3 STREET	ADDRESS				
CITY-ST-ZIP		FIDER	5.4 CITY - S	ST - 71P	· <u>- · · · · · · · · · · · · · · · · · ·</u>	F*1 0L	FT) Addition	
TITLE			6.1 TITLE		Change Addition		☐ Addition	
NAME STREET ADDRESS			6.2 NAME 6.3 STREET	AUDDECE				
CITY-ST-ZIP			6.4 CITY - S					
	I	ed with this filing is voluntarily furn			r the exemption stated in Section 119.	07(3)(k), Florida Statu	ites. 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 charged, or on an attachment with an address.

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

(407) 898-8053 Dayline Phone I