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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L86269

101

HOLMLIN ENGINEERING CORPORATION

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FILED						
May 19 1997 8:00am						
Secretary of State						



Principal Place	e of Business	Mailing Address		I (ODIIDII DDI IDIA BILID IIRAR DIIAN SOLI B	SALL GIALL BIBLE ASBIT ALBIS DIBLE 1881
8208-C E. COLO	ONIAL DR.	3208-C E. COLONIAL DR.	i		
SUITE 210		SUITE 210			
ORLANDO FL 3	12903	ORLANDO FL 32803		3. Date Incorporated or Qualified	3a, Date of Last Report
				07/09/1990	04/25/1996
9 Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	aco or bosinoss	26		59-3016754	Not Applicable
Sulte, Apt.	# elc	Suite, Apt. #, etc.			\$8.75 Additional
22	.,	27	İ	5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032.
24	25	29 30	3	Florida Statutes	Yes No
<u></u>	9. Name and Address of Current		'	10. Name and Address of New Reg	jistered Agent
HOL	MLIN, REX M		81 Name		
	3-C E COLONIAL DR #210		82 Street Addr	ress (P.O. Box Number is Not Acceptable	(e)
	ANDO FL 32803		5 July Street Addi	ess (F.O. Box Number is Not Acceptable	
VIII	TOPO I E GEOGG		83		
					los l 75 Code
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the pr	urpose of changing its registered
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat	r Horida, Such change was auti ions of, Section 607.0505, Floric	la Statutes.	poration submits this statement for the pilion's board of directors. I hereby accep	t me appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NOIE: R	egislered Agent signature requi	red when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	HOLMLIN, REX M		1.2 NAME		
STREET ADDRESS	3208C E COLONIAL DR #210		13 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32803		1 4 CITY-ST-ZIP		
TITLE	•	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2 NAME		
STREET ADDRESS			23 STREET ADORESS		
CITY-ST-ZIP			2 4 CITY - S1 - ZIP	•.	
TITLE		☐ DELETÉ	3 TITLE		Change Addition
. NAME			32 NAME		
STREET ADDRESS			3 STREET ADDRESS		
CITY-ST-ZIP	•		3.4. CITY-S1-ZIP		
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 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	,	:	6,3 STREET ADDRESS		Ì
1			6.4 CITY-ST-ZIP		
CITY-ST-ZIP	hy partifu that the information countied	with this filing does not qualify t		d in Section 119 07/3Vi). Florida Statutes	I further certify that the

I do hereby certify that the information supplied with this filling does not quality 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.

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