

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

01-16-2007 90193 005 ***150.00

DOCUMENT # M09746

1. Entity Name
ALONSO ENGINEERS & SURVEYORS, INC.



Principal Place of Business
**6157 NW 167TH STREET
SUITE F 15
MIAMI LAKES, FL 33015 US**

Mailing Address
**6157 NW 167TH STREET
SUITE F 15
MIAMI LAKES, FL 33015 US**



2. Principal Place of Business - No P.O. Box #

6187 NW 167th ST

3. Mailing Address

6187 NW 167th ST

Suite, Apt. #, etc.

SUITE H-5

Suite, Apt. #, etc.

SUITE H-5

City & State

MIAMI, FL.

City & State

MIAMI, FL

Zip

33015

Country

USA

Zip

33015

Country

USA

01032007 Chg-P CR2E034 (12/06)

4. FEI Number

59-2478958

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ALONSO, LAZARO D.
13992 LAKE GEORGE CT.
MIAMI LAKES, FL 33014**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

LAZARO D. ALONSO, PRESIDENT

JAN. 09, 2007

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent Signature required when changing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
ALONSO, LAZARO D.
13992 LAKE GEORGE CT.
MIAMI LAKES, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
ALONSO, MAYRA
13992 LAKE GEORGE CT.
MIAMI LAKES, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LAZARO D. ALONSO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 14, 2007 (305) 512-4940

Date

Daytime Phone #