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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(9)

FILED Feb 24 1998 8:00am Secretary of State

	ENGINEERING, INC.				
Principal Place of Business		Mailing Address	Mailing Address		A 1991AGN, 118 11991 JANE JANE 31412 1811 ALBIT ALBIT SISIL ALBIT
15249 CR 450 W.		P.O. BOX 2243			
UMATILLA FL 32784		UMATILLA FL 32784	UMATILLA FL 32784		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					03/07/1986
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For
21		26			NOT APPLICABLE Not Applicable
Suite, Apt. #, etc.		<u>-</u>	Suite, Apt #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Regulated
City & State		Cily & State	City & State		Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		Zip Country		try	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes X No
	g. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered Agent
	rd, hal keith		1	B1 Name	
15249 CR 450 W.			Ī	Street Ac	idress (P.O. Box Number is Not Acceptable)
UM.	ATILLA FL 32784				
			[B3	
			Ī	B4 City	85 Zip Code
	2007.00	on a look at on Figure			FL 6 2 P COUR
office or re	ogistored agent, or both, in the State ogistored agent, or both, in the State on familiar with, and accept the oblig	of Florida. Such change was a	uthorized	by the corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
SIGNATURE	The second of th				guired when reinstating) DATE
12.	Signature, typed or ponted name of registered lig-	D DIRECTORS	13.	Agent signature rei	quired when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 7(1)	.E	Change Addition
NAME	WARD, HAL KEITH		1.2 NAI		_ • _
STREET ADDRESS	15249 CR 450 W.		1.3 STF	EET ADDRESS	
CITY-\$T-ZIP	UMATILLA FL 32784		1.4 CfT	Y-ST-ZiP	
TITLE		DELETE	21 TH	.E	Change Addition
NAME			2.2 NAI	NE	nation
STREET ADDRESS			2.3 STF	BEET ADDRESS	1
CITY - ST - ZIP				Y-ST-ZIP	
TITLE		☐ DELETE	3.1 TITI		Change Addition
NAME			3.2 NAI		
STREET ADDRESS			1	EET ADDRESS	
CITY-ST-ZIP		DELETE	3.4. CIT	Y-ST-ZIP	Change Addition
TITLE NAME		□ Dereit			C) Smarige C) Adultion
			4, 2 NA	ME. EET ADDRESS	
STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	5.1 TITE	Y-S1-ZIP .E	Change Addition
NAME			5.2 NAI		From - confidence and constitution
STREET ADDRESS			ı	SEET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		DELETE	6.1 TIT		Change Addition
NAME			6 2 NA	ME .	
STREET ADDRESS			63 STF	LEET ADDRESS	
CITY-ST-ZIP		C	6.4 <u>C</u> IT	Y-S1-ZIP	
indicated officer or	certify that the information supplied v on this annual report or supplement director of the corporation or the rec or Block 13 if changed, or on an attr	with this ying does not sually to all any ult report is flue and acc eiver of trustee empowered to achinent with an address.	the exe urate and exicute th	mption stated that my signa his report as re	in Section 119.07(3)(i), Florida Statutes. I further certify that the information ature shall have the same legal effect as if made under oath; that I am an equired by Chipter 607, Florida Statutes; and that my name appears in
SIGNATURE: //U/98 (352)698193					