

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

FILED  
Feb 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M54851 (4)  
1. Corporation Name  
TRUGLIO & SMITH CONSULTING ENGINEER, INC.

Principal Place of Business  
4557 PONCE DE LEON BLVD  
CORAL GABLES FL 33146

Mailing Address  
4557 PONCE DE LEON BLVD.  
CORAL GABLES FL 33146



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 6401 SW 87 AVE Suite, Apt #, etc. 22 SUITE III City & State 23 MIAMI FL Zip 24 33173		2a. Mailing Address 25 6401 SW 87 AVE Suite, Apt #, etc. 27 SUITE III City & State 28 MIAMI FL Zip 29 33173		3. Date Incorporated or Qualified 06/30/1987	
26 6401 SW 87 AVE Suite, Apt #, etc. 27 SUITE III City & State 28 MIAMI FL Zip 29 33173		30 USA		4. FEI Number 59-2827148	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or (has paid) the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TRUGLIO, JOSEPH A. 4557 PONCE DE LEON BLVD. CORAL GABLES FL 33146		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 6401 SW 87 Ave 83 84 City Miami FL 85 Zip Code 33173	
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUGLIO, JOSEPH A.	1.2 NAME	
STREET ADDRESS	4557 PONCE DE LEON BLVD.	1.3 STREET ADDRESS	6401 SW 87 AVE
CITY-ST-ZIP	CORAL GABLES FL 33146	1.4 CITY-ST-ZIP	MIAMI FL 33173
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, JAMES F.	2.2 NAME	
STREET ADDRESS	4557 PONCE DE LEON BLVD.	2.3 STREET ADDRESS	6401 SW 87 AVE
CITY-ST-ZIP	CORAL GABLES FL 33146	2.4 CITY-ST-ZIP	MIAMI FL 33173
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: \_\_\_\_\_ DATE: 1/28/98 FILING NUMBER: 1-305-29-7959

CR2E034 (10/97)