SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPRO	FIT		
CORPORA	ΓΙΟN		
ANNUAL RE	PORT		
1 <b>9</b> 98			



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # N49488** 

(2)

i. Corporation	Ou Laguno	` '		\\
MAINTE	NANCE ENGINEERS ASSOC	CIATION, INC.		
Principal Plac	ce of Business	Mailing Address		4 126(1)Bt. 01) 4(0)2 (6)t) 0.001 (0)1 6(0)1 6(0)1 0)01 0)01 0)01 0)01 1001
3580-38TH AV	/E <b>8</b>	3580 38TH AVE \$		3. Date Incorporated or Qualified
#95 OT DETERMEN	UDA EL 22714	#95 St. Petersburg Fl 33711	Ī	06/18/1992
US	URO FL 33711	US		4. FEI Number Applied For
03	_	00		<b>59-2863591</b> Not Applicable
2. Principal F	Place of Business	2a. Mailing Address		5 Codificate of Status Depired \$8.75 Additional
21 550	FREST AUX S.	26 550 frest	DOES.	5. Certificate of Status Desired Fee Required
Suite, Apt	#. etc.	Sulte, Apt. #, etc.	7,000	6. Election Campaign Financing \$5.00 May Be
22 51 1	STE	27		Trust Fund Contribution Added to Fees
City & Sta		City & State		7. Is this nonprofit corporation a homeowners association?
23 - FCA.			BURG EV	Yes No
Zip	Country	Zip	Country	//
<u> </u>			10 Pinarias	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
24 337			PINEALAS	Personal Property Tax due June 30. L Yes No
<del></del> -	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
ĺ			81 Name	EMANN JEROLA D
LANGLOIS	s, <b>me</b> lus r		82 Street A	ddress (P.Q. Box Number Is Not Acceptable)
3580-3811	H AVE S		<u> </u>	O FIRST AUG SOUTH
#95			83	
	RSBURG FL 33711		2/	PATERS BURG
1 0			84 City	FL 85 Zip Code 3370/
i				
11. Pursuant	to the provisions of sections 617.0502	and 617.1508. Florida Statutes, t	he above-named corp	pration submits this statement for the number of changing its registered
11. Pursuant office or r	to the provisions of sections 617.0502 egistered agent, or both, in the State of	and 617.1508, Florida Statutes, tof Florida. Such change was auth	he above-named corporated by the corporate	pration submits this statement for the number of changing its registered
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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address. 813-896-3197

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR