

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90026 027 ***150.00

DOCUMENT # P00000026320 1. Entity Name CASE O'BOURKE ENGINEERING, INC.					
Principal Place of Business 3550 BISCAYNE BOULEVARD SUITE 606 MIAMI, FL 33137			Mailing Address 3550 BISCAYNE BOULEVARD SUITE 606 MIAMI, FL 33137		
2. Principal Place of Business 6118 NE 182 Street Suite, Apt. #, etc.			3. Mailing Address 6118 NE 182 Street Suite, Apt. #, etc.		
City & State Kenmore WA Zip 98028		City & State Kenmore WA Zip 98028		4. FEI Number 65-0991616	
Country King		Country King		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent O'BOURKE, NANCY CASE 3550 BISCAYNE BOULEVARD SUITE 606 MIAMI, FL 33137				7. Name and Address of New Registered Agent Name Amy Kimball-Murley Street Address (P.O. Box Number is Not Acceptable) 7520 Red Road, Suite M City South Miami FL Zip Code 33143	
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 Amy Kimball-Murley <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD CASE OBOURKE, NANCY 3550 BISCAYNE BLVD 606 MIAMI, FL 33137 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. 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 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: Amy Kimball-Murley President 3/1/04 425/985-5340 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					