2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 15, 2005 8:00 am Secretary of State DOCUMENT # P01000088177 1. Entity Name 02-15-2005 90019 009 ***150.00 HYDRA-SYSTEMS & ENGINEERING EQUIPMENT, INC. Principal Place of Business Mailing Address 10152 WEST INDIAN TOWN RD. 10152 WEST INDIAN TOWN RD. SUITE 202 SUITE 202 JUPITER, FL 33478 JUPITER, FL 33478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02122005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-1138670 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEREZ, JULIO Street Address (P.O. Box Number is Not Acceptable) 10152 WEST INDIAN TOWN RD. SUITE 202 JUPITER, FL 33478 City 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when revisiativg) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD THILE ☐ Defete THIF Change Addition NAME ECHEVARRIA, JULIO P PEREZ, ECHEVARRIA JULIO F. NAME 10152 WEST INDIAN TOWN RD, SUITE 202 10152 WEST INDIAN TOWN 12d. SUITE 202 STREET ADDRESS STREET ADDRESS JUPITER, FL 33478 CITY-ST-ZIP CITY-ST-ZIP JUPITER, FL 33478 VD BILE ☐ Celete ☐ Change TITLE Addition NAME PEREZ, JULIO 10152 WEST INDIAN TOWN RD. SUITE 202 STREET ADDRESS STREET ADDRESS JUPITER, FL 33478 CHY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NASSE NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP nn. ☐ Dotete □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CHY-SI-ZIP TITLE ☐ Delete TITLE Change Accition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP 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 recover 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 attact then with an address, with all other like empowered.

Julia

SIGNATURE:

FILED

703-626 -8678

Davime Phone #