## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000038029

FILED Jan 10, 2007 Secretary of State

Entity Name: MEP STRUCTURAL, ENGINEERING AND INSPECTIONS, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
3564 ENSIGN CIRCL DELRAY BEACH, FL				
Current Mailing Add	ress:	New Mailing Addres	s:	
3730 COCONUT CRE SUITE 100 COCONUT CREEK, I				
FEI Number: 04-3631783		FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
GIORLANDO, SALVA 3564 ENSIGN CIRCL				
DELRAY BEACH, FL  The above named ent	33483 US ity submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
DELRAY BEACH, FL  The above named enting the State of Florida.	33483 US ity submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
DELRAY BEACH, FL The above named ent in the State of Florida: SIGNATURE:	33483 US ity submits this statement for the		d office or registered agent, or both,  Date	
DELRAY BEACH, FL The above named ent in the State of Florida. SIGNATURE: Elec	33483 US ity submits this statement for the			
DELRAY BEACH, FL The above named ent in the State of Florida: SIGNATURE: Elec Election Campaign Finar	33483 US ity submits this statement for the tronic Signature of Registered Actions Trust Fund Contribution ( ).	gent		
DELRAY BEACH, FL The above named enting the State of Florida.  SIGNATURE:  Election Campaign Finar  OFFICERS AND DIR  Title: DP Name: GIORLAND Address: 3564 ENSIGNATION  Title: DP Name: Address: 3564 ENSIGNATION  Title: DP Name: Address: 3564 ENSIGNATION  Title: DP Name: Address:	33483 US ity submits this statement for the tronic Signature of Registered Agricing Trust Fund Contribution ( ).  ECTORS: ( ) Delete O, SALVATORE J	gent	Date	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE J. GIORLANDO DP 01/10/2007