FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Aug 14, 2003 8:00 am Secretary of State

DOCUMENT # PO2000044544 1. Entity Name ENGINEERING SYSTEM DESIGN, INC.						à	08-14-2003 90071 020 ***150.00		
ENGINEERING SYSTEM DESIGN, INC.									
DO NOT WRITE IN THIS SPACE							001000	. O. T	
2. Principal Place of Business 3. Mailing Address 6905 SW IST ST. 6905				72 721 WZ					
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State MARGATE,			City & State MARGATE,			4. FI	4. FEI Number Applied For		
FLORIDA			FLORIDA				02-0601878	Not Applicable	
330	3068 BROWARD		33068	BRO	GRACK	5 . C	ertificate of Status Desired	\$8.75 Additional Fee Required	
						7. Name and Address of Current Registered Agent			
DO NOT WOITE						ARIH R. CUDMORE . ss (P.D. Box Number is Not Acceptable).			
(090						3 Z Z	SW IST ST		
IN THIS SPACE									
					City MARGATE FL Zig Code 8				
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 Signature, typed or printed name of registered agent and title if applicable. [NOTE: Registered Agent signature required when reinstating) DATE									
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25							9. Election Campaign Financing Trust Fund Contribution. E	\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS							<u> </u>		
TITLE	P			TITLE					
NAME Street Address	OFFICE OF THE STATE OF THE STAT			NAME STREET ADDRESS					
CITY-ST-ZIP MARGATE, FL 33068			8	CITY-ST-ZIP					
TITLE				TITLE NAME			•		
name Street address	DRESS		1	STREET ADDRESS					
CITY-ST-ZIP	P		CITY-S	T-ZIP					
TITLE Name			TITLE NAME						
STREET ADDRESS				STREET ADDRESS		DA-NAT WDI	TC.		
CITY-ST-ZIP	CITY-ST-ZIP				CITY-ST-ZIP DO NOT WRITE				
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CITY-ST-ZIP	 			CUA-2	T-ZIP				
TITLE NAME				TITLE NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-S	T-ZIP				
TITLE NAME				TITLE					
STREET ADDRESS					ADDRESS			ł	
CRTY-ST-ZIP				CITY-S	1-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 turther certify that the information indicated on this report or successful 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 truttee emportered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/03

954 974 4922

Daylims Phone #

Asta ChmeNt

ESD

Engineering System Design, Inc.

Plumbing / Fire Sprinkler Systems & Architectural Plans

PO20000 H4544

6905 SW 1st Street Margate, FL 33068

(954) 974-4922 Fax: (954) 973-7082 drcesd@bellsouth.net

August 11,2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Uniform Business Report (UBR)

To Whom It May Concern:

Being a new corporation I did not know or receive any information on filing the UBR. I was directed to go online and download the report and send it in. Enclosed are my report and also my fee of \$150.00. Please process accordingly.

Phank you for your, help in this matter.

Darin R. Cudmore

President

ALSO WHEN I GOT INTO
THE SUNBIZORG WEBSITE
MY NAME FOR REGISTERED
AGENT WAS SPELLED WYONG.

DARRIN DARIN +
WRONG