## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000124501

Entity Name: INGHAM ENGINEERING, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3001 SW TI BAY 6	HIRD AVENUE					
FORT LAUI	DERDALE, FL	33315				
Current Mailing Address:				New Mailing Address:		
1215 SW 3 <sup>-</sup> FORT LAUI	I ST. DERDALE, FL	33315				
FEI Number:	65-1172580	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
ZELLER, RONALD J ESQ 222 LAKEVIEW AVENUE SUITE 260 WEST PALM BEACH, FL 33401 US				ZELLER, RONALD J ESQ 525 SOUTH FLAGLER DRIVE SUITE 200 WEST PALM BEACH, FL 33401 US		
The above in the State		bmits this statement for the pur	rpose of	f changing its	s registered of	fice or registered agent, or both,
SIGNATURE: RONALD J ZELLER ESQ						04/30/2007
	Electronic	Signature of Registered Agent	t			Date
Election Cam	paign Financing 1	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () C CRAIK, IAN S 3001 SW THIRD : FT. LAUDERDALI	· · · · · · · · · · · · · · · · · · ·		Title: Name: Address: City-St-Zip:	( )	Change ()Addition
Title: Name: Address: City-St-Zip:	S () C CRAIK, BRENDA 3001 SW THIRD A FT. LAUDERDALI	AVENUE, BAY 6		Title: Name: Address: City-St-Zip:	( )(	Change ()Addition
Title: Name: Address: City-St-Zip:	D () C CRAIK, IAN S 3001 SW THIRD A FT. LAUDERDALI			Title: Name: Address: City-St-Zip:	( )(	Change ()Addition
Title: Name: Address: City-St-Zip:	D () C CRAIK, BRENDA 3001 SW THIRD A FT. LAUDERDALE	AVENUE, BAY 6		Title: Name: Address: City-St-Zip:	( ) (	Change ( ) Addition
Title: Name: Address: City-St-Zip:	ZELLER, SUZÁNI	VENUE, SUITE 260		Title: Name: Address: City-St-Zip:	ZELLER, SUZAN	GLER DRIVE, SUITE 200
Title: Name: Address: City-St-Zip:	T () C CRAIK, BRENDA 3001 SW THIRD FT. LAUDERDALI	AVENUE, BAY 6		Title: Name: Address: City-St-Zip:	( ) (	Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify 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: IAN S CRAIK P 04/30/2007