


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 02, 2005 08:00 AM
Secretary of State**

DOCUMENT # P02000134176
1. Entity Name
ENGINEERING SCIENCES, INC.



Principal Place of Business: 5055 DOWN POINT LANE WINDERMERE, FL 34786
Mailing Address: 5055 DOWN POINT LANE WINDERMERE, FL 34786

DO NOT WRITE IN THIS SPACE



04212005 No Chg-P CR2E034 (10/03)

4. FEI Number: 59-3763048 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JOSEPH, GEORGE P
5055 DOWN POINT LANE
WINDERMERE, FL 34786

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IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JOSEPH, GEORGE P JR.
STREET ADDRESS	5055 DOWN POINT LANE
CITY-ST-ZIP	WINDERMERE, FL 34786
TITLE	D
NAME	JOSEPH, SANDRA K
STREET ADDRESS	5055 DOWN POINT LANE
CITY-ST-ZIP	WINDERMERE, FL 34786
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 attached or on an attachment with an address, with all other like empowered.

SIGNATURE: George P. Joseph J 4/29/05 407 876 8774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #