


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2008 8:00 am
Secretary of State

02-14-2008 90020 034 ***150.00

DOCUMENT # P03000023007	
1. Entity Name BUHOLTZ PROFESSIONAL ENGINEERING, INC.	

Principal Place of Business 110 S MAGNOLIA AVE SANFORD, FL 32771 US	Mailing Address 110 S MAGNOLIA AVE SANFORD, FL 32771 US
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DO NOT WRITE IN THIS SPACE

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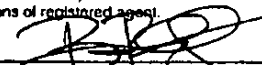


01242008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2318466	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BUHOLTZ, BRIAN T PE 106 TRACE POINT PLACE WINTER SPRINGS, FL 32708	DO NOT WRITE IN THIS SPACE
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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 	DATE <u>2/18/08</u>
<small>Signature must be printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	

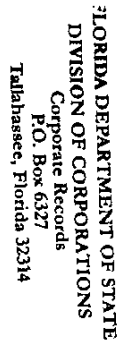
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> *** \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BUHOLTZ, BRIAN T PE 106 TRACE POINT PLACE WINTER SPRINGS, FL 32708
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with an officer-like empowered.	
SIGNATURE: 	DATE <u>3/19/08</u> DAYTIME PHONE <u>4073304848</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

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