## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOCO.

111

1. Corporation Name FRENCH ENGINEERING, INC.  Principal Place of Business  Mailing Address  15531 KUYKENDAHL STE. 275 HOUSTON TX 77090  SUITE 275								
		HOUSTON TX 77090-3649 US			3. Date Incorporated or Qualifie	d <b>3e</b> . [	Date of Last Re	eport
		00			07/25/1990	1	/30/1996	.,
2. Principal Piace of Business		2a. Mailing Address			4. FEI Number		}	plied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			76-0300608		\$8.75	Additional
22		27			5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution		Added t	
Zφ	Gountry	Zip	Count	ту	This corporation has liability f     Florida Statutes	or intangibl Yes		. 199.032,
24	25 9. Name and Address of Curren	29  t Registered Agent	30]	<del>· · · · · · · · · · · · · · · · · · · </del>	10. Name and Address of New	_=		
				81 Name Fell, James E.				
- 1005-0. FLORIDA AVE SUITE 205			8	1		table)		
					ress (P.O. Box Number is Not Accept 1234 Airport Road	· · · · · · · · · · · · · · · · · · ·		
TAK	ELAND FL 33903		8	3				
			8	4 City	Destin,	FI	<b>85</b> Zip (	i
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statut	es the aho			e purpose	of changing it	5 4 1
office or r agent. La	to the provisions of Sections 607 050 egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was a ations of, Section 607.0505, Flo	authorized I orida Statut	oy the corpora es.	tion's board of directors. I hereby ac	cept the ap	pointment as	registered
SIGNATURE	Sag lature, typed or preside same of registered agor	nt no.4 tille de comerabile /NOT	- Registered A	riant signature requi	ired when reinstating)	DATE		<u></u>
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF		ID DIRECTOR	IS IN 12
TILE	PTD DELETE		1 1 TITLE			**************************************	Change	Addition
NAME	FRENCH, WARREN R.		1.2 NAME 1.3 STREET ADORESS					
STREET ADDRESS	22426 TRAILWOOD LANE							
CITY - S1 - 74P	TOMBALL TX		1.4 CITY-ST-ZIP					
THLE	VSD DELETE		2.1 TITLE				Change	Addition
NAME	FRENCH, PHYLIS J. WILSON		2.2 NAM					
STREET ADDRESS	22426 TRAILWOOD LANE TOMBALL TX			ET ADORESS				
CITY - ST - ZIP TITLE	TOMBALL IX		2 4 CITY-ST-ZIP 3.1 TITLE				Change	Addition
NAME			3.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP			3.4. City					
TITLE		DELETE	4.1 Tille			***************************************	Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STRE	ET ADDRESS				
City - S* - 7iP			4.4 CITY			<del> </del>	— — — — — — — — — — — — — — — — — — —	
TOTLE	DELETE		5.1 TITLE	l			☐ Change	Addition
N4ME			5.2 NAM	ì				
STREET ADDRESS				ET ADDRESS				
CHY+S*-ZiP		DELETE	5.4 CITY	······································	······································		Change	☐ Addition
TITLE		£_ beaut	6.1 TITLE 6.2 NAM				L. Vilange	- Addition
NAME STREET ADDRESS				ET ADORESS				
STREET ADDRESS			0.3 5180	t i MUUNESS				

14. F do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an all achingment with an address.

**SIGNATURE:** 

1-6-97 (281) 440-8284

**FILED** 

Feb 03 1997 8:00am

Secretary of State