## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Apr 29, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P930000094 ngineering, inc.	32			Secretary of State	
Principal Place 4425 WATER ORLANDO, FI	MILL AVENUE	Mailing Address 4425 WATERMILL AVENUE ORLANDO, FL 32817				
D	O NOT WRITE		CE	04262005 4. FEI Numbe 59-316		
6. Name and Address of Current Registered Agent  CYNTHIA, LOSSO A  4425 WATERMILL AVENUE  ORLANDO, FL 32817-1380				DO NOT WRITE IN THIS SPACE		
the obligat	named entity submits this statement for to ions of registered agent.  Signature, typed or printed name of registered agent and  E NOW!!! FEE IS \$150.00  ay 1, 2005 Fee will be \$550.00	title if applicable (NOTE Register  9. Election Campaign Fina	ed Agent signature required		th, in the State of Florida. I am familiar with, and accept	
TO.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DI PST LOSSO, MARK 4425 WATERMILL AVENUE ORLANDO, FL 32817	RECTORS				
TITLE NAME STREET ADDRESS CITY - ST- ZIP	0.15.11.20.7				00000341611 04/29/05-80020-023 150.00	
NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP		,			THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I 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 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 all other like empowered.						