

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000045561

Entity Name: BND ENGINEERS, INC.

FILED  
Jan 03, 2008  
Secretary of State

## Current Principal Place of Business:

4090 NW 97TH AVENUE  
SUITE 300  
MIAMI, FL 33178 US

## New Principal Place of Business:

## Current Mailing Address:

4090 NW 97TH AVENUE  
SUITE 300  
MIAMI, FL 33178 US

## New Mailing Address:

FEI Number: 65-0421519      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, BASIL  
4090 NW 97TH AVENUE  
SUITE 300  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete  
Name: WILLIAMS, BASIL S  
Address: 4090 NW 97 AVE STE 300  
City-St-Zip: MIAMI, FL 33178

Title: VPD ( ) Delete  
Name: BUDALL, MICHAEL A  
Address: 6150 SW 153 CT RD  
City-St-Zip: MIAMI, FL 33193

Title: VD ( ) Delete  
Name: KEANE, KEVIN A  
Address: 15103 SW 146 AVE  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BASIL WILLIAMS

PTSD

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date