Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90026 017 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000067374

1. Corporation Name

LCM ENGINEERING, INC.

Principal Place of Business Mailing Address					F 1000000 NO 10100 MIN DENI DENI DENI DENI DENI 1000 MIN 1000 MIN 1000 DENI 1000
5389 MARINA DRIVE 5389 MARINA DR. BOKEELIA FL 33922 BOKEELIA FL 33922					DO NOT WRITE IN THIS SPACE
us us					3. Date Incorporated or Qualifed
!					09/28/1993
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21 26					65-0438967 Not Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired See Required
City & State		City & State			
23	· · · · · · · · · · · · · · · · · · ·	28	1-		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year Intangible
24	25	29 3	0		Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
MIDI	ANA LEMME C			81 Name	ne
MIDLAM, LEWIS C 5383 MARINA DR				82 Street	et Address (P.O. Box Number is Not Acceptable)
BOKEELIA FL 33922				83	
	,				
	,			84 City	FL 85 Zip Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auti	nonzed	by the corp	ed corporation submits this statement for the purpose of changing its registered opporation's board of directors. I hereby accept the appointment as registered
SIGNATURE		And the Workship Morte, D			ire required when reinstating) DATE
12.	Signature, typed or printed name of registered ager OFFICERS AN	D DIRECTORS	13.	Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITI	E	Change Addition
NAME	MIDLAM, LEWIS C		1.2 NA	ИE	·
STREET ADDRESS	5389 MARINA DR		1.3 STF	EET ADDRESS	SS
CITY-ST-ZIP	BOKEELIA FL		1.4 CIT	Y-ST-ZîP	
TILE		DELETE	2.1 TIT	.E	Change Addition
NAME			2.2 NA	Æ	
STREET ADDRESS			2.3 ST	REET ADDRESS	ss ·
CITY-ST-ZIP			2. 4 GI	Y-ST-ZIP	
_TITLE	• •	☐ DELETE _	,3.1 TIT	£	Change Addition
NAME			3.2 NA	ΛE	
STREET ADDRESS			3.3 STI	REET ADDRESS	ss
CITY-ST-ZIP			_	Y-ST-ZIP	☐ Change ☐ Addition
TITLE	_	☐ DELETE	4.1 777		☐ Change ☐ Addition
NAME	·		4. 2 NA		
STREET ADDRESS				REET ADDRESS	SS
CITY-ST-ZIP		☐ DELETE	_	Y+ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TIT 5.2 NA		— ← Charige ☐ Adultion
NAME				NE REET ADDRESS	99
STREET ADDRESS				Y-ST-ZIP	33
CITY-ST-ZIP		□ DELETE	6.1 TITI		☐ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information indicated on this annual report or so officer or director of the corporation Block 12 or Block 13 if changed or 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 ental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TILE

NAME

STREET ADORESS

DELETE

☐ Change

☐ Addition

1917