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 # P93000072735 (2)

MEA ENGINEERS, INC.

FILED Mar 21 1997 8:00am Secretary of State



Principal Pak 2531 WILKINSO SARASOTA FL		Mailing Address 2531 WILKINSON ROAD SARASOTA FL 34231-5207			1949/905 410 4000 1101 621/1 801/1 801/1 901/1 4010 1/0/1 40144 11/0/ 61/1 (001				
						3. Date Incorporated or Qualified 10/12/1993		ate of Last I 22/1996	Report
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number 65-0446544			pplied For ot Applicable	
Suite, Apt. # letc		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional legulred
City & Sta	de	City & State	·			6. Election Campaign Financing			May Be
23 Zip	Country	28 Ζφ	T - Co	untry		Trust Fund Contribution			to Fees
24	25	29	30	Ciriti y		B. This corporation has liability for Florida Statutes		tax under : ∐ No	s. 199.032,
	9. Name and Address of Current	L	. 1751			10. Name and Address of New Re	gistered	Agent	
KAN	APMANN, JOHN H JR			81	Name				
253	1 WILKINSON ROAD			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)		
SAR	rasota FL 34231			83					
								T T	<u> </u>
				84	City		FL	85 Zip	Code
12. 11718 NAM	OFFICERS AND OFFICERS AND OFFICERS AND MICHEJDA, OSKAR		13. 111 1.21	NAME		uured when reinstaring) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTO	RS IN 12
STREEL ADDRESS ONLY STEZIE	3663 COUNTYR PALCE BLVD SARASOTA FL			STREET Dity-s	ADDRESS				
THE	VD	🔀 DELETE		ITLE				Change	Addition
NAME:	GRAY BILL M		2.2 /	NAME					
STREET ADORESS			2.3 \$	STREE	ADDRESS				
CHY-SL-ZIP	LONGBOAT KEY FL	DELETE			ST - Z(F)		·· ···· ·······	Change	T Lazer
NAM:	STD KEMPMANN JR JOHN	LJ DECETE		HTLE NAME		PC			Addition
STREET ADDRESS	2531 WILKINSON ROAD				ADDRESS	Campmann, Jr Jo		7 1	
CITY - S1 - ZiP	SARASOTA FL		i i		ST-ZIP				
THE		DELETE		IILE				Change	Addition
NAME			4 2	NAME	l				
SPREET ADDRESS			435	STREET	ADDRESS				
CITY: ST. Zin		DE SE		OITY - S	7 - 7IP			T	
11111		☐ DELETE		IIILE				Change	Addition
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COLY ST 20 THEE		DELETE		HTLE	11 - LIT			Change	Addition
NAME			li i	VAME					
STREET LABOURSS					ADDRESS				
(21x-\$1-21£			6.4 (CITY - S	1 - ZIP				

14. I do hereby certify that the information 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 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 orientation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/97

941 922 3854

Daytime Phone #