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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000088391 (6)

ANALYSIS, ENGINEERING AND SUPPLY, INC.

FILED May 13 1998 8:00am Secretary of State

Principal Place of Businoss Mailing Address								I TOOTION (1% TEADS WELL DON) ABILI ABILI ABILI ABIN) SALON EILIA IDIDE HER EADL		
19243 N.W. 53RD CIRCLE PLACE MAMN FL 33055			19243 N.W. 53RD CIRCLE PLACE MIAMI FL 33055			Œ		DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified 12/27/1993		
2.	Principal Place of Busine	ess	20	2a. Mailing Address				4, FEI Number Applied For		
21			26	16				65-0451920 Not Applicable		
22	Suite, Apt. #, etc.			Suite, Apt. #, etc				6. Certificate of Status Desired Section 5. Section 5. Section 5. Section 6. Certificate of Status Desired Section 6. Sec		
23	City & State			City & Stale				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
24	Zip	Country	29	Zip	30	ountry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
g, Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent		
VASQUEZ, HIPOLITO						81	Name			
19243 NW 53RD CIRCLE PL MIAMI FL 33055						82	Street Addre	treet Address (P.O. Box Number is Not Acceptable)		
MARINE COOP						83				
		•				84	City	FL 85 Zip Code		
11	office or registered ago	ons of Sections 607 0502 int, or both, in the State of n, and accept the obligate	Flori	da Such change was	authoriz	ed by	the corporati	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
ŞI	GNATURE									
		r printed manie of registered agent.					nt signature require	od when reinstating) DATE		
11	2.	DIRE	CTORS 13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			

SIGNATURE	Signature, typed or printed mone of registered agent and title it.	applicable (NOT)	Registered Agent signature requi	ired when reinstating) DATE
12.	OFFICERS AND DIRECT	·····	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1 1 TITLE	Change Addition
NAME	VASQUEZ, HIPOLITO		1.2 NAME	
STREET ADDRESS	19243 N.W. 53RD CIRCLE PL		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33055		1.4 CITY - ST - ZIP	
THLE	ST	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	VASQUEZ, MARIA C		2.2 NAME	
STREET ADDRESS	19243 N.W. 53RD CIRCLE PL		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33055		2 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
KAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADORESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE	-	DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
OTT OT THE			6.4.0(EV . 07. 3)(0	

14. I 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 supplementar a mual report is frue 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 proof 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 if changed, or a partial priment with an address.

SIGNATURE: