

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000013886

1. Entity Name
DUNKELBERGER ENGINEERING & TESTING, INC.



Principal Place of Business
1225 OMAR ROAD
WEST PALM BEACH, FL 33405 US

Mailing Address
1225 OMAR ROAD
WEST PALM BEACH, FL 33405 US



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0476374

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DUNKELBERGER, DOUGLAS S
1225 OMAR ROAD
WEST PALM BEACH, FL 33405

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P
DUNKELBERGER, DOUGLAS S
1225 OMAR ROAD
WEST PALM BEACH, FL 33405

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VS
O'CONNOR, MICHAEL J
11532 165 RD N
JUPITER, FL 33478

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
V
TEPPER, THOMAS J
1225 OMAR ROAD
WEST PALM BEACH, FL 33405

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
V
DUNKELBERGER, CRAIG E
523A N.W. ENTERPRISE DRIVE
PORT ST. LUCIE, FL 34986

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

UN0000110997
04/12/04-80104-012 158.75

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IN THIS SPACE**

12. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Douglas S Dunkelberger President 4/8/04 561 681 4299