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

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000016002 (5)

UNITED INTERNATIONAL ENGINEERING CONSULTANTS, IN

Principal Place of Business

Mailing Address

**FILED** Apr 29 1998 8:00am Secretary of State



9700 KOGER BLVD N 307		9700 KOGEH BLVD N 307				
ST PETERSBURG FL 33702		ST PETERSBURG FL 33702		DO NOT WRITE IN 1	DO NOT WRITE IN THIS SPACE	
. =				3. Date Incorporated or Qualified		
			<del></del>	02/22/1994		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 318 GULF TO BAY BLV D		26 3118 GULF TO BAY BLUD		59-3234949	Not Applicable	
22 <b>5</b> 24		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		27 3 2 4 City & State		A Flatin Committee Figure	<del></del>	
23 CLEARWATER FL		28 CLEARWATER FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid th		
24 8375	9 25 USA	29 33759	30 USA	Personal Property Tax due June 30.	Yes No	
<del></del>	g. Name and Address of Current			10. Name and Address of New Registe	ered Agent	
DR	IS, MICHAEL E ESQ.		81 Name	Allian Milano		
	S PINELLAS AVE			AHIM. KHADER  Address (P.O. Box Number is Not Acceptable)		
	RPON SPRINGS FL 34689		31	8 GULF TO BAY BL	VD #324	
			83			
			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code	
	_		CLE	ARWATER.	FL 33759	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stat	utes, the above-named	corporation submits this statement for the purpoporation's board of directors. I hereby accept the	se of changing its registered	
agent. I a	m <b>fam</b> iliar with, and accept the <u>oblica</u>	tions of, Section 607.0505, I	s admonzed by the con Florida Statutes.	, ,	,,	
SIGNATURE	UM O	<b>L</b>		4/7	2498	
<del></del>	Signature Typed or printed name of registered ager		OTE: Registered Agent signature			
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12  Change Addition	
	• -	T orreit	1.1 TITLE		HA Cusufe	
NAME	KHADER, IBRAHIM 9700 KOGER BLVD N		1.2 NAME	3118 GULF TO BAY BLA	D # 32 4	
STREET ADDRESS	\$T PETERSBURG FL		1.3 STREET ADDRESS	Stradom to Stradom	2759	
CITY-ST-ZIP TITLE	OT PETENSBUNG PL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	CHEARWATER FL 3	Change Addition	
NAME		CJ DECETE	2.2 NAME		C Change C Madition	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-SI-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 TillE		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	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
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			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	ortify that the information supplied wit	h this filing does not qualify		od in Section 119 07/31/i) Florida Statutes I furth	or portify that the information	

receive verify that the information supplied with this little does not quality 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 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 12 or Block 13 if changed, or on an attachment with an address.