

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 James Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 JAN -2 AM 11:11

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P94000027932

1. Corporation Name
CONSULTING ENGINEERS, INC.

Principal Place of Business Mailing Address
 6410 GRANDA BLVD 6410 GRANDA BLVD
 CORAL GABLES FL 33146 CORAL GABLES FL 33146
 US US



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 6410 GRANADA BLVD	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida 04/08/1994
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number 65-0498022
City & State Coral Gables	City & State FL	Applied For Not Applicable
Zip FL 33146	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
SD	PENIN, CARLOS A	6410 GRANDA BLVD	CORAL GABLES FL 33146

100009771311
 01/02/03--01004--007 **308.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PENIN, CARLOS A
 100 MIRACLE MILE
 #300
 CORAL GABLES FL 33134

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	
State FL	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

Carlos Penin
 SIGNATURE REQUIRED
 REGISTERED AGENT MUST SIGN

Date

12/30/2002

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Carlos Penin
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/30/2002

(305) 666-7178

CR2E040 (8/02)

Consulting Engineers, Inc.
100 Miracle Mile, Suite 300
Coral Gables, FL 33134

December 30, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

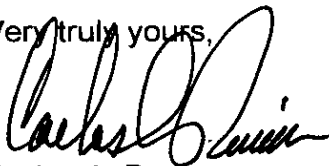
Re: Application for Consulting Engineers, Inc.
Document #P94000027932
65-0498022

To whom it may concern:

This is to inform you that we did not receive the original application for the Annual Report /Uniform Business report for 2002. Based on a conversation with a representative from your department we therefore have enclosed a check in the amount of \$308.75. for the application fee.

If you have any questions, or wish to discuss this further, please contact Ms. Grisel Macareno or me at (305) 461-5484 ext. 204.

Very truly yours,



Carlos A. Penin
President