## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

**DIVISION OF CORPORATIONS** 

1996

**DOCUMENT #** 1. Corporation Name

P94000039282 (6)

BECHTEL SYSTEMS INTEGRATORS, INC.

Principal Place of Business 10211 BUTTERCUP CT

Mailing Address

10211 BUTTERCUP CT



PEMBROKE PINES FL 33026		PEMBROKE PINES FL 33026						
6 Division 2					3. Date Incorporated or Qualified 05/20/1994	3a. Date	of Last F 07/13/1	•
2, Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number			Applied For
Suite, Apt.	# etc	26 Suite Apt # ete			65-0477609			Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required			
City & State  23  Zip	28				Trust Fund Contribution			00 May Be ed to Fees
24	Country 25	Ζιρ <b>29</b>	Cour 30	ntry	8. This corporation has liability for in Florida Statutes		cunder s	199.032,
<del></del>	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New R	epistered A	gent	
			1	81 Name				
	EDA, RODOLFO D		F	82 Street Ad	ddress (P.O. Box Number is Not Acceptab	le)		
10211 BUTTERCUP CT								
PEMBI	ROKE PINES FL 33026			83				
				64 City		FL	1 1	p Code
<ol> <li>Pursuant to or register.</li> </ol>	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the abov	e named corp	coration submits this statement for the pur	pose of char	nging its	registered office
	h, and accept the obligations of Sect			orporation's b	poration submits this statement for the purposard of directors. I hereby accept the appo	intment as n	egisterec	dagent. I am
SIGNATURE.	bigrature, typed or printed name of registered agent		TE Registered	AM & A	B. Poleda aured wher reinstallings	9/5-/9	<u></u>	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI	CERS AND I	DIRECTO	DRS IN 12
THTLE	D President	DELETE	. 1 1 TH	LE			Change	☐ Addition
NAME CAREET ARRESTOR	PEREDA, RODOLFO D 10211 BUTTERCUP CT		1.2 NA	AE .				
STREET ADDRESS	PEMBROKE PINES FL 3302	<b>\</b>		EET ADDRESS				
CITY+ST-ZIP TITLE	O UTCC PICE L			r-ST-ZIP				
NAME	PEREDA, PAMULA	ow.	2. 1 7(1				Change	■ Addition
STREET ADDRESS	10211 BUTTERCUP CT		2 2 NAM					
CITY-S1-ZIP	PEMBROKE PINES FL 3302	<b>%</b>		EET ADDRESS				
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NAME		_	3.2 NAN			·	Change	☐ Addition
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CHY-S1-ZIP				- ST- ZIP				
TITLE		☐ DELETE	4 1 TITE			<u> </u>	Change	Addition
NAME			4 2 NAM	IE		L		
STREET ADDRESS			4.3 STR	ET ADDRESS				•
CITY-ST-ZIP			4.4 City	-ST-ZIP				
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NAME			5.2 NAM	E			-	
STREET ADDRESS			53STR	ET ADDRESS				
CITY-ST-ZIP			54 CITY	- ST-ZIP				
TITLE		☐ DELETE	6 1 THTL	F			Change	Addition
NAME			62 NAM	E				
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIF			6.4 City	- ST- 71P				

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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 12 if changed, or on an attachment with an address.

PAMOLA & Pereda 2/5/96