

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075404 (1)

1. Corporation Name

LG ENGINEERING SERVICES, INC.



Principal Place of Business

Mailing Address

**9545 SW 24TH STREET STE. B-108
MIAMI FL 33165**

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MIAMI FL 33165**

3. Date Incorporated or Qualified
10/12/1994

3a. Date of Last Report
04/04/1995

2. Principal Place of Business
21 **7370 NW 36 STREET**

2a. Mailing Address
26 **330 WEST PARK DRIVE**

4. FEI Number
65-0550962

Applied For
Not Applicable

Suite, Apt. #, etc.
22 **SUITE 100-C**

Suite, Apt. #, etc.
27 **SUITE #104**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State
23 **MIAMI, FLORIDA**

City & State
28 **MIAMI, FLORIDA**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 **33166**

Zip
29 **33172**

8. This corporation has liability or intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GARCIA, LEO
9545 SW 24TH STREET STE. B-108
MIAMI FL 33165**

81 Name **GARCIA, LEO**
82 Street Address (P.O. Box Number is Not Acceptable)
330 WEST PARK DRIVE
83 **SUITE 104**
84 City **MIAMI** FL 85 Zip Code **33172**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PVPS	<input type="checkbox"/> DELETE
NAME	GARCIA, LEO	
STREET ADDRESS	9545 SW 24TH ST., #B108	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PIT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LEO GARCIA	
1.3 STREET ADDRESS	330 WEST PARK DRIVE, # 104	
1.4 CITY-ST-ZIP	MIAMI, FL. 33172	
2.1 TITLE	VP/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	MOHAMAD SCUNY SAHEN	
2.3 STREET ADDRESS	1751 SW 24 ST.	
2.4 CITY-ST-ZIP	MIAMI, FLORIDA 33145	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/96 305-994-8128

CR2E034 (12/95)