2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000079287

City-St-Zip:

CASSELBERRY, FL

Entity Name: ENGINEERICA SYSTEMS INC.

FILED Apr 26, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10236 DYLAN ST. 2431 ALOMA AVE. **SUITE # 117** #226 ORLANDO, FL 32825 US WINTER PARK, FL 32792 US **Current Mailing Address: New Mailing Address:** PO BOX 677096 ORLANDO, FL 32867 US FEI Number: 59-3278140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PENAFIEL, CESAR 7632 TIMBER RIVER CIR ORLANDO, FL 32807 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. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PENAFIEL, CESAR Name: Name: 7632 TIMBER RIVER CIRCLE Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: VΡ () Delete Title: (X) Change () Addition NASSEREDEEN, MON Name: Name: NASSEREDEEN, MON 9830 DEAN WOOD PL 9833 TATTERSALL AVE. Address: Address: ORLANDO, FL ORLANDO, FL 32817 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MANCERA, CARLOS Name: Name: 4153 CROSSROADS PL Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MON NASSEREDDEEN VP 04/26/2002