

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000079287

FILED
Mar 18, 2005
Secretary of State

Entity Name: ENGINEERICA SYSTEMS INC.

Current Principal Place of Business:

2431 ALOMA AVE.
SUITE # 117
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 677096
ORLANDO, FL 32867 US

New Mailing Address:

FEI Number: 59-3278140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASSEREDDEEN, MON
2431 ALOMA AVE.
SUITE 117
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

NASSEREDDEEN, MAN
2431 ALOMA AVE.
SUITE 117
WINTER PARK, FL 32792 US

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: MAN NASSEREDDEEN

03/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP (X) Delete
Name: PENAFIEL, CESAR
Address: 1110 BEL AIR DR, APT B
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: P () Delete
Name: NASSEREDDEEN, MON
Address: 5600 SAND CRANE COVE
City-St-Zip: OVIEDO, FL 32765

Title: S (X) Delete
Name: MANCERA, CARLOS
Address: 1495 MARTIN BLVD
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: NASSEREDDEEN, MAN
Address: 5600 SAND CRANE COVE
City-St-Zip: OVIEDO, FL 32765

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MAN NASSEREDDEEN

P

03/18/2005

Electronic Signature of Signing Officer or Director

Date