FILE NOW: FILING FEE AFTER MAY 1 15 \$225.00

PROFIT CORPORATION ÅNNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary o\State*

DIVISION OF CORPORATIONS

P95000013780 (8) **DOCUMENT #**

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

H & P ENGINEERING SERVICES, INC.

Principal Place of Business Mailing Address 425 S.W. 11TH AVE.					<u> </u>			
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 3			FL 33312		3. Date Incorporated or Qualified 3a. Date of Last Report 02/17/1995			
		2a. Mailing Address			4 ECI Number	·······	Apı	plied For
2. Principal Place of Business		26 26		65-0556620 Not A		t Applicable		
1		Suite, Apt. #, etc.		\$8.75 Additi				
Suite, Apt. #,	27					Fee Re	<u> </u>	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
3 City & State		28			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032,			
Zip	Country	Zip	Cou	ntry		ntangible tax i	unders i	59.032,
24	25	29	30	·	Fiorida Statutes Yes 10. Name and Address of New R	enistered Ac	sent .	
•	9. Name and Address of Curre	ent Registered Agent		1	10. Name and Address of New 1	cgibto.co.12		
				81 Name				
DESIDERIO, PETER L				82 Street Address (P.O. Box Number is Not Acceptable)				
	T BROWARD BLVD.			<u> </u>				
SUITE 1900				83				
	FT LAUDERDALE FL 33301			84 City		FL	85 Zip	Code
				<u> </u>	ration submits this statement for the pur and of directors. I hereby accept the app	of obser	cipo ite se	nistered office
Framiliai Will	ed agent, or both, in the State of Fig. n, and accept the obligations of, Se Styriative, typed or proted higher of registered at	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(NOTE Registere	d Agent signature require		DATE		
12.		AND DIRECTORS	13.		ADDITIONS/GHANGES TO OFF	ICENS AND	Change	Addition
TITLE	D	DELETE		TITLE			3	
NAME	HANTZ, WOLFGANG			NAME				
STREET ADDRESS	MARKGRAFENSTER 93			STREET ADDRESS				
CITY-S1-ZIP	7GAA5 FREIBURG, GERM	ANY		CITY-ST-ZIP		- г] Change	Addition
TITLE	Secretary			117LF		_		_
NAME	Rolv Heggenhor	agen		NAME				
STREET ADDRESS	425 Palm Aven	ue		STREET ADDRESS				
CITY-ST-ZIP	Ft. Lauderdal	e, Fl. 3 <u>3312</u>		CITY - ST - ZIP		Г] Change	Addition
TITLE		- DELETE	T T	TITLE		_	- ·	_
NAME				NAME				
STREET ADDRESS				STREET ADDRESS				
CiTY - ST - ZiP				CITY ST-ZIP		F	Change	Addition
TITLE		☐ DELETE		1 TITLE	2000017 -04/12/9601	7855°	3 <u>- '</u> '	
NAME			1 ·	NAME	-04/12/9601	UPPOF	}4	
STREET ADDRESS				STREET ADDRESS	***200.00			
CITY-ST-ZIP				CITY ST-ZIF		-	7 Change	Addition
TITLE		DELETE	1	1 TITUE				
NAME				? NAME				
STREET ADDRESS				STREET ADDRESS				
	1		5.4	1 CITY - ST - ZIP				

6 1 TITLE

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:

DELETE.

Change