FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ...

Secretary of State DIVISION OF CORPORATIONS

1997

NAME

STREET ADDRESS

CIFY - ST - ZIP

DOCUMENT # P95000026331 (5)

DUNOL ENGINEERING CORPORATION

Principal Place of Business 9505 SW 136TH STREET MIAMI FL 33178		Mailing Address 9505 SW 136TH STREET MIAMI FL 33178-6803					
				3. Date Incorpora 04/03/1995		Date of Last Report 07/08/1996	
2. Principal P 21	Place of Business	2a. Mailing Address 26		4. FEI Number 65 - 6	715908	Applied Fo	
Suite, Apt 22	#. etc.	Suite, Apt. # etc.		5. Certificate of Si	/	\$8.75 Addition Fee Required	
City & State	0	City & State		6. Election Campa Trust Fund Con		\$5.00 May Be Added to Fees	
7 ф	Country (25)	Zip .	Country 30	8. This corporatio Florida Statutes		ible tax under s. 199.03	32,
	9. Name and Address of Currer	nt Registered Agent			dress of New Register	red Agent	
	AGBE, AUGUSTINE O		81 Nar	me			
	15 SW 136TH STREET IMI FL 33178		82 Stre	eet Address (P.O. Box Numbe	r is Not Acceptable)		
			83				
			84 City	/		85 Zip Code	
SIGNATURE	to the provisions of Sections 607.050 registered agent or both, in the State artifant accept to original accept to originate the state of the state	AU GUSTINE A	TAGBE TE Registered Agent sign	ature required when reinstating)	DAI	1/97	
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CH/	ANGES TO OFFICERS	AND DIRECTORS IN 12	2 dd:tion
TIBLE NAME	AJAGBE, AUGUSTINE O	L.J Detter	1.2 NAME			El cuande El Ar	uu:tion
STREET ADDRESS	9505 SW 138TH STREET		1.3 STREET ADDRE	ss			
C(17 - \$1 - Z)P	MIAMI FL 33178		1.4 CHTY-\$1-ZIP				
1046		L DELETE	2.1 TITLE			Change	ddition
NAM* STREET ADDRESS			2.2 NAME 2.3 STREET ADDRE	22			
CHY-ST ZO			2.4 CITY - ST - ZIP	00 (
1011		DELETE	3.1 THILE			Change Ac	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRE	SS			
DITY - ST - ZiP TiffeE		☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE			Change A	Addition
NAME		prixtt	4,1 THE			in outside in the	BUILDI
STREET ADORESS			4.3 STREET ADDRE	ss			
CITY - \$1 - 20F			4.4 CITY-ST-ZIP	<u> </u>			
TOTALE		DELETE	51 TITLE			Change Ac	ddition
NAME			5 2 NAME				
STREET ADORESS			5.3 STREET ADDRE	ss			
COTY - ST - ZH		DUETE	5.4 CITY - ST - ZIP			Change A	

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. Los hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual reports true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or circetor of the corporation or the recipied or provided in providing the corporation of the recipied of the provided 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 one attachment with an address. Lam an officer or director of the corporation or the reappears in Block 12 or Block 13 if changed, or on SIGNATURE:

FILED

Feb 26 1997 8:00am

Secretary of State