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

Jun 02 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000029937 (6) DVM ENGINEERING SERVICES, INC. Principal Place of Business Mailing Address 8072 SEWELL LANE 9072 SEWELL LANE SPRING HILL FL 34608 SPRING HILL FL 34608 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3314346 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Žφ Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MOORE, DEAN E 9072 SEWELL LANE 82 Street Address (P.O. Box Number is Not Acceptable) SPRING HILL FL 34608 83 84 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed harne of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE MOORE, DEAN E 1.2 NAME BEEN MUONE, OEAN, E **3106 S FEORIDA AVE** 9012 SEWELL LN SPRING HILL FL 3460B STREET ADDRESS 1.3 STREET ADDRESS INVERNESS EL 34450 CITY-ST-ZIP 1.4 CITY - ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE MOORE, VALERIE M MOORE, VALERIE, M NAME 2.2 NAME **3106-3-FLORIDA-AVE** 9012 SEWELL LN 2.3 STREET ADDRESS STREET ADDRESS HIVERNESS FL-84450 SPRING HILL FL 34600 City-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 1111 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP ☐ Change DELETE Addition 5.1 TITLE TITLE NAME 52 NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADORESS **63 STREET ADDRESS** 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filting 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 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

MIDONE

Block 12 or Block 13 if changed, or on an attachment with an address,

Mass

FILED

5/1/98 252-602-1191