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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P95000046473

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90090 025 ***150.00

Principal Place	INEERING, INC. of Business OOD BOULEVARD	Mailing Address 3440 HOLLYWOOD SUITE 470 HOLLYWOOD FL 33			DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed		
		O- Marillan Address			06/14/1995 4. FEI Number	Ann	lied For
⊢ `	lace of Business	2a. Mailing Addres	s		65-0588128	<u> </u>	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, e	tc.			\$8.75 A	
22		27.			5. Certificate of Status Desired	Fee Re	uired
City & State	е	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23	28			Trust Fund Contribution Added to Fees		Fees	
Zip			untry	8. This corporation owes the current year Intangible			
24	25	29	30		Personal Property Tax. 10. Name and Address of New Registered		□No
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered	Agent .	
CORPORATION COMPANY OF MIAMI 201 S. BISCAYNE BOULEVARD 1600 MIAMI CENTER MIAMI FL 33131				82 Street A 83 84 City	ddress (P.O. Box Number is Not Acceptable)	85 Zip C	ode
office or r	egistered agent, or both, in the State or familiar with, and accept the obligation	of Florida, Such change ions of, Section 607.05	was authorize 05, Florida Sta	ed by the corpor itutes.	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appo	changing its intment as reg	registered pistered
	Signature, typed or printed name of registered agent				ADDITIONS/CHANGES TO OFFICERS AI	ID DIRECTO	DC IN 12
12.	OFFICERS AND	DIRECTORS DEL	13 ETE 111	TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change	☐ Addition
TITLE	D Naeter, Hans-Christian			NAME.			
NAME	3440 HOLLYWOOD BOULEVAR	D CHITE 470	and the second			•	\
STREET ADDRESS	HOLLYWOOD FL 33021	D, SUITE 470		STREET ADDRESS			į.
CITY-ST-ZIP	HOLLTWOOD PL 33021	DEL		CITY-ST-ZIP		Change	Addition
TITLE				NAME			
NAME				STREET ADDRESS			
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TITLE		☐ DEL		TITLE		Change	Addition
NAME		·		NAME		_ •	
ļ !				STREET ADDRESS			1
STREET ADDRESS				CITY-ST-ZIP			
CITY-ST-ZiP		☐ DEL		TITLE		Change	Addition
TITLE				NAME			_
NAME				STREET ADDRESS			-
STREET ADDRESS				CITY-ST-ZIP	•		
CITY-ST-ZIP TITLE		□ DEL		TITLE		Change	Addition
)	•	_ 550		NAME			
NAME	·			STREET ADDRESS			
STREET ADDRESS				CITY-ST-ZIP			
TITLE		☐ DEL		TITLE		☐ Change	Addition

14. I hereby certify that the information supplied with this 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 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 of the corporation of the corporation of the receiver of the corporation or the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation o

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP