SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000046617

CELTA ENGINEERING CORPORATION

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

07-07-1999 90012 007 ***550.00



Principal Plac	e of Business			M	lailing Ad	ldress						
481 S.W. 13TH TERRACE					4481 S.W. 13TH TERRACE							
AIAMI FL 33134			MI	MIAMI FL 33134					DO NOT WRITE IN THIS SPACE			
										3. Date Incorporated or Qualified		
										06/15/1995		
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For		
m ·					26					65-0602495 Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional		
2				27						Fee Required		
City & State					City & State					6. Election Campaign Financing \$5.00 May Be		
3			28					-	Trust Fund Contribution Added to Fees			
Zip	Ļ	Coun	try	ļ	Zip		\vdash	intry		8. This corporation owes the current year		
4		25		29]			30	_		Intangible Personal Property. Yes No		
	9. Name	and Add	ress of Curre	nt Kegi	stered A	gent		81	Name	10. Name and Address of New Registered Agent		
PDIE	TO CARLO	ç			•				Hairie			
PRIETO, CARLOS 4481 S.W. 13TH TERRACE								82	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33134					•			83	<u> </u>			
Mica	III I E 00 10 T			•				00				
								84	City	FL 85 Zip Code		
11 Burauan	t to the provin	ione of Fc	ctions 607.060	2 and 6	07 150B	Florida Statute	e the ah	<u>Ш</u>	named como	oration submits this statement for the purpose of changing its registered		
office or	registered ag	ent, or bo	oth, in the State ccept the oblig	of Flor	ida. Sucl	h change was .	authorize	d by	the corporat	tion's board of directors. I hereby accept the appointment as registered		
SIGNATURE										0.55		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: 12. OFFICERS AND DIRECTORS								: Registered Agent signature requi		quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVST		OFFICENS AF	AD DIKE	LOTORG	DELETE	1.1 7)	TLE		Change Addition		
NAME	PRIETO, C	ADI OS				☐ DECE IE	1.2 N		+	Change Addition		
STREET ADDRESS	4481 S.W.		EDDACE						ADDRESS			
	MIAMI FL		LINAUL					TY-ST				
CITY-ST-ZIP TITLE	D	00 104				DELETE	2.1 TI	_		Change Addition		
NAME	PRIETO, C	ARIOS				CO DECESE	2.2 N	AME				
STREET ADDRESS	4481 S.W.		FRRACE						ADDRESS			
CITY-ST-ZIP	MIAMI FL							TY-ST				
TITLE	tuent treet t E	30104				DELETE	3.1 T		-	Change Addition		
NAME							3.2 N	AME				
STREET ADDRESS						Mary and Authorities of the Control		_	ADDRESS			
CITY-ST-ZIP								TY-ST				
TITLE	<u> </u>		*12			DELETE	4.1 TI			Change Addition		
NAME							4.2 N	AME				
STREET ADDRESS							4.3 S	REET	ADDRESS			
CITY-ST-ZiP	l						4.4 C	TY-ST	-ZIP			
TITLE	 		· · · · · · · · · · · · · · · · · · ·	_		DELETE	5.1 TI			Change Addition		
NAME	1		11.				5.2 N	4ME		-		
STREET ADDRESS	5						5.3 S1	REET	ADDRESS			
CITY-ST-ZIP	}						5.4 C	TY-ST	-ZIP			
TITLE						DELETE	6.1 T			Change Addition		
NAME							6.2 N	AME		= • –		
STREET ADDRESS									ADDRESS			
CITY-ST-ZIP								TY-ST				

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 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