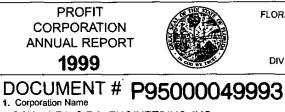
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## **FILED** May 01, 1999 8:00 am Secretary of State 05-01-1999 90058 017 \*\*\*150.00

BAY ARE	EA C.P.I. ENGINEERING INC	<b>3.</b>					
Principal Place	e of Business	Mailing Address				<b>                                   </b>	<b>Digg</b> hiji ( <b>Ba</b> l
216-176TH TERRACE 216-176TH TERRACE							
REDINGTON SHORES FL 33708 REDINGTON SHORES FL 33			708				
U\$ U\$					DO NOT WRITE IN THIS SPACE		
		•			3. Date Incorporated or Qualifed		
0.00	Manager of Charles	2a. Mailing Address			06/26/1995 4. FEI Number		olied For
₹ · · · · · · · · · · · · · · · · · · ·			-		59-3326059	<u> </u>	Applicable
1			<del></del>		T	\$8.75 A	·
¬``''		<u> </u>			5. Certifcate of Status Desired	Fee Red	
City & State	e		City & State		6. Election Campaign Financing	\$5.00	May Ra
3		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country		8. This corporation owes the current year in	ntangible	
24	25	29	30		Personal Property Tax.		□No
· <u>···</u>	9. Name and Address of Currer				10. Name and Address of New Registered	1 Agent	
			81	Name	<del>-</del> -		
	CIC, JURAJ R.		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	176 TERR			Oll Cot / tour			
RED	INGTON SHORES FL 33708		83				
		,	84	Cit.		85 Zip C	nde
			• •	City	FI	L     3	000
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable. (NOTE: I ID DIRECTORS	Registered Agent s.	ignature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE		• •	☐ Change	☐ Addition
NAME .	BRACIC, JURAJ R.		1.2 NAME				
STREET ADDRESS	216-176 TERR		1.3 STREET A	DDRESS			
CITY-ST-ZIP	REDINGTON FL		1.4 CITY-ST-2	ZIP	<u> </u>		
TITLE -	DVPS	☐ DELETE	2.1 TITLE	]		☐ Change	☐ Addition
NAME .	ZADEU, DORIANA V.		2.2 NAME		•		
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	REDINGTON SHORES FL		2. 4 CITY-ST-	ZIP	22 300 400 500 500 500	- Change	- Addition
TITLE ·	. "	☐ DELETE	3.1 TITLE	,		Change	Addition
NAME			3.2 NAME				
STREET ADORESS			3.3 STREET AL	- 1			
CITY-ST-ZIP	· · · · ·		3.4. CITY-ST-	ZIP		☐ Change	Addition
TITLE	,	☐ DELETE	4.1 TITLE	.			L.J ( logition
NAME .	-		4, 2 NAME				
STREET ADDRESS			4.3 STREET A	1			
CITY-ST-ZIP		DELETE	4.4 CITY-ST-Z	ZIP		☐ Change	Addition
TITLE	1	☐ DELETE	5.1 TITLE 5.2 NAME		·		
NAME			5.3 STREET A	DORESS			
STREET ADDRESS			5.4 CITY-ST-2				
CITY-ST-ZIP	-	DELETE	6.1 TITLE	-		Change	Addition
TITLE		□ peré le	6.2 NAME				
NAME			6.3 STREET A	DORESS	•		
STREET ADDRESS			BACITY-ST-7				

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 suppliemental 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, with all other like empowered.

SIGNATURE: