

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 15 1998 8:00am  
Secretary of State

DOCUMENT # **P95000057246 (7)**  
1. Corporation Name

**PYPER ENGINEERING, INC.**



Principal Place of Business

**8695 COLLEGE PARKWAY  
SUITE 238  
FORT MYERS FL 33919**

Mailing Address

**8695 COLLEGE PARKWAY  
SUITE 238  
FORT MYERS FL 33919**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/25/1995**

4. FEI Number

**65-0598340**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

**21 8695 College Parkway**  
Suite, Apt. #, etc.  
**22 219**

2a. Mailing Address

**26 8695 College Parkway**  
Suite, Apt. #, etc.  
**27 219**

City & State

**23 Ft Myers, FL**

Zip

**24 33919**

Country

**25 USA**

City & State

**28 Ft Myers, FLORIDA**

Zip

**29 33919**

Country

**30 USA**

9. Name and Address of Current Registered Agent

**PYPER, ANDREW M  
8695 COLLEGE PARKWAY  
SUITE 238 - X  
FORT MYERS FL 33919**

10. Name and Address of New Registered Agent

**81 Name PYPER, ANDREW M.  
82 Street Address (P.O. Box Number is Not Acceptable)  
8695 COLLEGE PARKWAY  
83 SUITE 219  
84 City Ft Myers FL 85 Zip Code 33919**

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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE **ANDREW M. PYPER**

**JULY 8, 1998**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME PYPER, ANDREW M  
STREET ADDRESS 8695 COLLEGE PARKWAY  
CITY-ST-ZIP FORT MYERS FL 33919**

TITLE ☐ DELETE

**NAME PYPER, PATRICIA C  
STREET ADDRESS 8695 COLLEGE PARKWAY  
CITY-ST-ZIP FORT MYERS FL 33919**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

**ANDREW M. PYPER**

**JULY 8, 1998 94-437-2029**

CR2E034 (5/98)