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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075477 (6)

NODALCO ENGINEERING INC.

FILED Apr 27 1998 8:00am Secretary of State

.,						
Principal Place	of Business	Mailing Address			I INDITUDA ELO TREPE BITTE DUTE UBERL UDELL DURE BURL PURDE D	HEL MINH BUNIT INN 1900
4500 N. HIATUS RD.		4500 N. HIATUS RD.				
STE 202		STE 202				
SUNRISE FL 33351		SUNRISE FL 33351	SUNRISE FL 33351		DO NOT WRITE IN THIS SPACE	
					 Date Incorporated or Qualified 09/26/1995 	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0615955	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8,75 Additional
22		27				Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	T 0		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	ıry	8. This corporation owes or has paid the curre	
24	25 25 Name and Address of Curren	29	30		Personal Property Tax due June 30.	
NO		it negistered Agent		Name	10. Italio alla Addida di Itali Italia di Ag	join
	DAL, CARLOS A					
	10 NW 20TH CT		18	Street Add	dress (P.O. Box Number is Not Acceptable)	
SU	NRISE FL 33322			33		
			[4	City	FL	85 Zip Code
44 Burewood t	to the provisions of Sections 607 050	2 and 607 1508 Florida Statu	tos the abo	overnamed col	rnoration submits this statement for the nurnose of o	hanging its registered
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	Signature, typed or printed name of registered age	nt and ritle it applicable (NO	1f Registered	Agent signature regi	uired when reinstating) DATE	
12.	OFFICERS ANI		13.	3 ,	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12
TITLE	P	DELETE	1.1 1171	E		Change Addition
NAME	NODAL, CARLOS A PE		1.2 NAN	1E		
STREET ADDRESS	4500 N. HIATUS RD.		1 3 STH	EET ADDRESS		
CITY-ST-ZIP	SUNRISE FL 33351	140		-ST-ZIP		
TITLE		DELETE	21 111	E		Change Addition
NAME			2 2 NAN	1E		
STREET ADDRESS			2 3 STA	EET ADDRESS	19 J. S.	
CITY-ST-ZIP			2 4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	3 1 TITL	E		Change Addition
NAME			3 2 NAM	1E		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP		
TITLE		DELETE	4.1 TITL	E		Change Addition
NAME			4. 2 NA	MF		
STREET ADDRESS		•	4 3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CIT	r-ST-ZIP		
TITLE		DELETE	5.1 TITL	E		Change Addition
NAME			. 5.2 NAM	1E.		
STREET ADDRESS			5.3 STR	EET ADDRESS		
CITY-ST-ZIP			5.4 CIT	r-ST-ZIP		<u> </u>
TITLE		DELETE	6.1 TITL	E		Change Addition
NAME			6.2 NAM	AE		
STREET ADDRESS			6.3 STR	EET ADDRESS		
CITY-ST-ZIP			6.4 CIT	/- \$1 - 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 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 principle of the corporation with an address.

MARIOS A WODA

11-20-08 024-741-2573

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