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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09 1998 8:00am Secretary of State

	1998	DIVISION OF C	ORPORA	TIONS	Societary	or State
1 '	MENT # P9600 TO ENGINEERING SERVICE	00023097 (4) ES. INC.				
,,,,,,					E LEGALISEE NIC LANGE BRIDE BRIDE BRIDE BERNE BRIDE	11 00 0 11001 00 11 0 10111 1001 1001
Principal Plac	o of Business	Mailing Address				<u> </u>
Principal Place of Business Mailing Address 5955 SW 88 CT. 5955 SW 88 CT.						
MIAMI FL 33173 MIAMI FL 33173					20.125.115.25.115.25	
					DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
]					03/14/1996	}
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21	26				65-0655160	Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	City & State City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z iD	Country	Zip	Coun	try	8. This corporation owes or has paid the	
24	9. Name and Address of Curre		30		Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
P.C	DRIGUEZ, IRENE L	ALL HOSIOLOGO ASSILL		81 Name	To, traine and Addiese of Not Hegiston	a Agent
NOUNIQUEZ, INCINE L				Street Add	ress (P.O. Box Number Is Not Acceptable)	
MIAMI FL 33173				Stieet Add	iless (F.O. Box Number is Not Acceptable)	
][33		
!			ε	34 City		85 Zip Code
44 Durauant	to the provinces of Sections 607.05	02 and 607 1609 Florida Statute	an the ob-	nuo nomed sor	Forthing a libraria this statement for the nurses	
office or r	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized	by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
Ť	m lamiliar with, and accept the opin	gations of, Section 607.0305, Flo	nica Statu	(62)		
SIGNATURE	Signature, typed or printed name of registered eq			Agent signature requi	red when reinstating) DATE	
12.	OFFICERS AF	ND DIRECTORS DELETE	13.	-	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	RODRIGUEZ, IRENE L		1.1 TITL 1.2 NAM	i i		Cutange Li vocition
STREET ADDRESS	5955 SW 88 CT.			EET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33173		4	-ST-ZIP		
TITLE		DELETE	2.1 TITL			Change Addition
NAME			2.2 NAM	E))
STREET ADDRESS				EET ADORESS		
CITY-ST-ZIP		DELETE		Y-ST-ZIP	<u></u>	Change Addition
TITLE NAME		DLLCTE	3.1 TITLI 3.2 NAM			Circulation Circulation
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				/-ST-ZIP		
TITLE		DELETE	4.1 TITU	E		Change Addition
NAME			4. 2 NAN	AE		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITLE	-ST-ZIP		Change Addition
TITLE NAME		pecete	5.2 NAM			C. Change C. Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	_			-ST-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP	ertify that the information supplied	with this filing does not qualify for	6.4 CITY		Section 119.07(3)(i). Florida Statutes, Lfurther	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.