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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

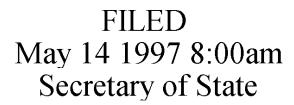
## DOCUMENT # P96000051731 (3)

STRUCTURAL CONSULTANTS INTERNATIONAL INC.

Principal Place of Business

Mailing Address

5000 38TH STREET SOUTH ST. PETERSBURG FL 33711 5000 38TH STREET SOUTH ST. PETERSBURG FL 33711-4824





ST. PETERSBUR	IG FL 33/11		DI. PEIEN	SOUND FL SS/I	1-9029					
							3. Date Incorporated or Qualified 3. Date of Last Report 06/14/1996			eport
2. Principal Place of Business 29. Mailing Address 21 6 1 40 5 RO AVE. NO. 26 6 1 40 3					AVE NO.		4. FEI Number		-	oplied For
21 6 7 1 Suite, Apt		O AVE I			7	, 100,	<b>1</b>	<del></del>		ot Applicable
22	n, eic		<b></b>	Suite, Apt. #, etc.			<ol><li>Certificate of Status Desired</li></ol>		\$8.75 / Fee Re	
City & State	)			City & State			6. Election Campaign Financing		\$5.00	· · · · · · · · · · · · · · · · · · ·
, _		uce, Fo		PETER	sBun	a, F	Trust Fund Contribution		Added 1	
Zip		Country	Zip		Count		8. This corporation has liability for			. 199.032,
24 <i>33 7</i> ,		5		4/0	30				No	
			urrent Registered A	Agent		I Nome	10. Name and Address of New Ro	agistered A	igent	<del></del>
SEALS N' SIGNATURES INC. 6822 22ND AVENUE N., SUITE 277 ST. PETERSBURG FL 33710						81 Name				
						Street Ad	ldress (P.O. Box Number is Not Accepta	ble)		
\$1. P	E I EKSBUR	3 FL 33/10			8:	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
					<u> </u>			·		
					8-	4 City		FL	85 Zip (	Code
11. Pursuant t	to the provisio	ns of Sections 60	7.0502 and 607.1508	8, Florida Statut	tes, the abo	ve-named co	orporation submits this statement for the	purpose of	changing it	s registered
office or re agent. Lar	eg stered age m familiar with	nt, or both, in the l n, and accept the i	State of Florida. Suc obligations of, Section	ch change was on 607.0505, Fi	aulhorized t orida Statut	by the corpores.	ration's board of directors. I hereby acce	pt the appo	ointment as	registered
SIGNATURE.	Signature, typed o	pouled name of register	ed agent and tire if applica	ble (NO)	E: Registered A	gent signature re	guirad when reinstaling)	DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 12		
TILLE	PRESE	OCUT		☐ DELETE	1.1 TITLE				Change	Addition
NAME	GKAN	ur RE	DOLE.	. mal	1.2 NAME					
STREET ADDRESS	6140	JRO A	ue, Non	67 <b></b> 6	1.3 STRE	ET ADDRESS				
City-St-ZiP	51. 10	erew B	us. Nas use, Fi	337/0	1.4 CITY			<del></del>	<u> </u>	Addres-
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STREET ADORESS						ET ADDRESS				i
COY-51-20° TITLE				DELETE	2. 4 CITY 3.1 YITLE		****		Change	Addition
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STREET ADDRESS						ET ADDRESS				
CITY-\$1-ZiF					3.4. CITY					
THE				DELETE	4.1 TITLE				☐ Change	Addition
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CHY-ST-Zif*					4.4 CiTY	ST-ZIP				
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HAME					5.2 NAM					ļ
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STREET ADDRESS					6.3 STRE	ET ADDRESS				ļ
CHY-ST-7P					6.4 City	ST-ZIP				
	ov certify tha	me information su	polied with this filing	does not quat			ted in Section 119.07(3)(i), Florida Statut	es. I further	certify that	the

4. I do hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated don this annual report of supplemental annual regrif 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if chapted, or on as attachment, then address

SIGNATURE:

STATUTE FOR TYPED OR PROMUSE NAME OF SIGNING OFFICER OR DIRECTOR

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