## 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 # P96000068548 (2)

KRAJNIK ENGINEERING GROUP, INC.

## **FILED** Jan 16 1997 8:00am Secretary of State



Principal Place of Business 4800 S.W. 74TH COURT MIAMI FL 33155		Mailing Address 4900 S.W. 74TH COURT MIAMI FL 33155-4400								
						3. Date Incorporated 08/16/1996	or Qualified	<b>3a.</b> Da	te of Last F	leport
2. Principal P	Place of Business	2a. Mailing Adores:	s		<del></del>	4. FEI Number			Aı	oplied For
21		26			65 - 0691988 Not Applicable					
Suite Apt.	# etc	Suite, Apt. #, etc.			5. Certificate of Statu	e Desired			Additional	
22		27				G. Certificate of State	3 D031160		Fee Re	equired
City & State	te'i	City & State			6. Election Campaign Financing \$5.00 May Be					
23		Zip Country			Trust Fund Contrib		<u> </u>		to Fees	
Zıp	Country	Zip	<del></del>	untry		8. This corporation h				. 199.032,
24	25	[29]	30			Florida Statutes		Yes [		
	9. Name and Address of Curr	ent Hegistered Agent		81	Name	10. Name and Addre	SS OT NEW RE	gistered /	Agent .	
	AJNIK, MARK			<b>∤"</b> ∤	IVanie					
	O S.W. 74TH COURT			82	Street Add	ress (P.O. Box Number is	Not Acceptal	ole)		
MIA	MI FL 33155			83						
				03						
				84	City				<b>85</b> Zip	Code
	to the provisions of Sections 607 0			$\perp \perp$				FL		
SIGNATURE	Signature, typed or profest can e of registered a	igent and tile of applicable	(NOTE: Registers		t signature requ	ired when reinstating) ADDITIONS/CHANG	GES TO OFFI	DATE CERS AND	DIRECTO	RS IN 12
TITLE	D	DELE	TE 1.1 T	TLE		, p. 60			Change	Addition
NAME	KRAJNIK, MARK		1.2 N	IAME						
STREET ADDRESS	4900 S.W. 74TH COURT		1.3 9	STREET A	DDRESS					
CITY-ST-ZIP	MIAMI FL 33155		1.40	CITY-ST	- ZIP					
TITLE		DELE	TE 21 T	ITLE					Change	Addition
NAME			2.2 N	IAME						
STREET ADORESS			2.3 9	STREET A	DDRESS					
CITY ST-ZIP			2. 4	CITY-ST	-ZIP					
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NAME	j		3.2 M	VAME	Ì					
STREET ADDRESS	1		335	STREET A	DORESS		•	* :		
CITY - ST - ZIP				CITY-ST	-ZIP					
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TITLE		DELE		TITLE	ĺ				Change	Addition
NAME				NAME	Į	*			-	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIF			640	CITY-ST	- ZIP					

14. I do 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.