

P96000091902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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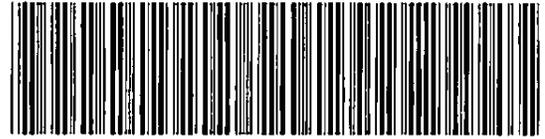
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONSTRUCTION ENGINEERING CONSULTANTS CORP.
Name of Corporation

DOCUMENT NUMBER: P96000091902

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEBRA L. BONE

Name of Contact Person

CONSTRUCTION ENGINEERING CONSULTANTS CORP.

Firm/Company

11410 N.W. 18th ST.

Address

PEMBROKE PINES, FL 33026

City/State and Zip Code

dhone@ceconstruct.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Bone at (954) 439-6694
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

