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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

 1999

DOCUMENT # Paroooo28072 1. Corporation Name Engine Builders, INC. FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90020 031 ***150.00

Principal Place of Business Mailing Address			
·			
HOTH NE5th Terrace OaklandPark, FL 33334			
OaklandPark, FL 33334		DO NOT WRITE IN THIS SPACE	
,			Date Incorporated or Qualifed
			3134144
2. Principal Place of Business 2a. Mailing Address			4. FEI Number
21 4074 NF 5 Terrace 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			Not Applicable 5. Cartifacto of Status Posited \$8.75 Additional
			5. Certificate of Status Desired Fee Required
27		6. Election Campaign Financing \$5.00 May Be	
Oakland Park, FL 28		Trust Fund Contribution Added to Fees	
Zip Country Zip Country		8. This corporation owes the current year Intangible	
24 3334 25 29	30		Personal Property Tax.
Name and Address of Current Registered Agent		,	10. Name and Address of New Registered Agent
Joseph 11 20 11-11	8	1 Nam	ne
Joseph H. Dillard HOTH NESTA TERRACE	8	2 Stree	et Address (P.O. Box Number is Not Acceptable)
DOIN WED JELLEGE	_		
Oakland Park, FL 33334	8	3	
	8	4 City	85 Zip Code
			FL W
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statut office or registered agent, or both, in the State of Florida. Such change was a 	uthorized b	y the co	rporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo	rida Statute	s.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE	· Decistered An	ant signatur	ire required when reinstating) DATE
12. OFFICERS AND DIRECTORS	13.	ent signatu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE & Joseph H.Dillard DELETE	1.1 TITLE		☐ Change ☐ Addition
, , , , , , , , , , , , , , , , , , ,	1.2 NAME	•	
STREET ADDRESS COKland Park, FL 33334	1.3 STRE	ET ADDRES	ss
CITY-ST-ZIP	1.4 CITY-	ST-ZIP	
TITLE DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	2.2 NAME		1
STREET ADDRESS	2.3 STRE	ET ADDRES	SS
CITY-ST-ZIP	2.4 CITY		
TITLE DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	3.2 NAME		
STREET ADDRESS		ET ADDRES	58
CITY-ST-ZIP TITLE DELETE	3.4. CITY-		Change Addition
	4.1 TITLE 4.2 NAME		Change Addition
NAME STREET ADDRESS		E ET ADDRES	
STREET ADDRESS CITY-ST-ZIP	4.3 STRE		~
TITLE DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	5.2 NAME		
STREET ADDRESS	5.3 STRE	ET ADDRES	as e
CITY-ST-ZIP	5.4 CITY-	ST-ZIP	
TITLE DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	6.2 NAME		
STREET ADDRESS	6.3 STRE	ET ADDRES	ss
CITY-ST-ZIP	6.4 CITY-	ST-ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for	r the exemp	tion stat	ted in Section 119.07(3)(i). Florida Statutes, I further certify that the information

4. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/99
Date Daytime Phone #

CR2E034 (11/98)