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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

14. I hereby certify that the information expolice with indicated on this annual report or supplemental a officer or director of the corporation or the corporation of the Block 12 or Block 13 if changed, or on an attach

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 23 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000053344 (2)

FLORIDA ENGINEERING ASSESSMENTS, INC.

Principal Place of Business Mailing Address 9873 LAWRENCE ROAD 9873 LAWRENCE ROAD SUITE A107 SUITE A107 DO NOT WRITE IN THIS SPACE BOYNTON BEACH FL 33436-3802 BOYNTON BEACH FL 33436-3802 3. Date Incorporated or Qualified 06/17/1997 2. Principal Place of Business 21 8719 NW 6 4-C 2a. Mailing Address Applied For **8719 WW** Suite, Apt. #, etc. 65-0762569 Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing CORD SPRINGS DRAL SPRINGS \Box 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible BROWARD 25 BROWARD 33071 Yes Personal Property Tax due June 30. 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAHON, TIMOTHY K 2929 EAST COMMERCIAL BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **PENTHOUSE** E 83 FT LAUDERDALE FL 33308 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, I lorida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. PSD DELETÉ Change Addition 1.1 TITLE TITLE Lewis J. SUAREZ SADOWSKI, MICHAEL J 12 NAME NAME 8719 NW 6thct. 9873 LAWRENCE ROAD SUITE A107 STREET ADDRESS 1.3 STREET ADDRESS **330 BOYNTON BEACH FL 33436-3802** COROL SPRINGS, F CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 TITL€ 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 61 TITLE TITLE

6.2 NAME

with an actores

6.3 STREE1 ADDRESS

icd will this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information vental and the information vental report is true and account that my signature shall have the same legal effect as if made under oath; that I am an charge or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

PRESIDENI

4-15-98

6.4 CITY-ST-ZIP