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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000059822

1. Corporation Name

ENGINEERED BUILDING SERVICES, INC.

				_		
Principal Place	of Business	Ma	ailing Address			t (BB)(det tre carts cont said; sain sans sara; entre rate rate res
6619 S DIXIE H	WY	66	19 S DIXIE HWY			
SUITE 328			SUITE 328			DO NOT WRITE IN THE SPACE
MIAMI FL 33143			MIAMI FL 33143			DO NOT WRITE IN THIS SPACE
US		US	i			3. Date Incorporated or Qualifed
_	·					07/09/1997
2. Principal Place of Business			2a. Mailing Address			4. FEI Number Applied For
21						APPLIED FOR Not Applicable
Suite, Apt.	#, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State -			City & State			6. Election Campaign Financing \$5.00 May Be
		28				Trust Fund Contribution . Added to Fees
Zip Country			Zip Count		itry	This corporation owes the current year Intangible
24 25		29	30			Personal Property Tax. Yes No
	9. Name and Addre	ss of Current Regis	tered Agent			10. Name and Address of New Registered Agent
					81 Name	
DIAZ	, Jose Alberto				02 C4+ A-	description (D.O. Boy Number is Not Assentable)
6619	S DIXIE HWY				82 Street Ac	ddress (P.O. Box Number is Not Acceptable)
SUIT	E 328			t	83	
l MIAN	AI FL 33143					
{			\wedge		84 City	FL 85 Zip Code
44 5		The state of the s	SEOS Forida Oto	tutos the ab	avo bamad ac	
office or r	to the provisions of Sest egistered agent, or both,	in the State of Florid	da euch change was	s authorized	by the sorpora	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agricy (.)	n familiar with, and ance	pt the objections	Section 607.0205, F	Florida Statu	(es) Mas	101/06
SIGNATURE	1/1/25/8	eduff to		<u>د رام</u>	~ /	
	Slovature, typed or printed name			13.	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		FFICERS AND DIRE	DELETE	1.1 TITI	- 1	Abbitionormatical of the latest and
TITLE	DP	/	Distance		_	
NAME	DIAZ, JOSE ALBER			1.2 NA		
STREET ADDRESS	6619 S DIXIE HWY,	SUITE 328		1.3 STF	REET ADDRESS	•
CITY-ST-ZIP	MIAMI FL 33143			1.4 ÇIT	Y-ST-ZIP	
TITLE			☐ DELETE	2.1 TIT	E	Change Addition
NAME	,			2.2 NA	ME .	
STREET ADDRESS	•			2.3 STF	REET ADDRESS	
CITY-ST-ZIP	, ,			2. 4 CR	Y-ST-ZIP	
TITLE	•		☐ DELETE	3.1 1111	E	☐ Change ☐ Addition
NAME		•		3.2 NA	ME	
STREET ADDRESS				3.3 STF	REET ADDRESS	
CITY-ST-ZIP	•			3.4. CI	Y-ST-ZIP	•
TITLE			☐ DELETE	4.1 111		Change Addition
NAME				4.2 NA	ME.	
					REET ADORESS	
STREET ADDRESS					1	
CITY-ST-ZIP			DELETE	5.1 TIT	Y-ST-ZIP	Change ☐ Addition
TITLE				5.1 III	I	
NAME						
STREET ADDRESS	-				REET ADDRESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			Y-ST-ZIP	D06
TITLE			☐ DELETE	6.1 TIT		Change Addition
NAMÉ				6.2 NA		
STREET ADDRESS				6.3 STF	REET ADDRESS	

CITY-ST-ZIP 14. 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 expressed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or truste Block 12 or Block 13 if changed or on an attachment with

6.4 CITY-ST-ZIP

SIGNATURE