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FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000080605 (3)**

1. Corporation Name

POWER ENGINEERING SERVICES, INC.



Principal Place of Business

Mailing Address

**215 CORAL DR.
CAPE CANAVERAL FL 32920**

**P. O. BOX 913
CAPE CANAVERAL FL 32920**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3996 DUNDEE DRIVE
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22
City & State

23 MERRITT ISLAND FL
Zip Country

24 32953

25 US

27
City & State

28
Zip Country

29

30

3. Date Incorporated or Qualified

09/15/1997

4. FEI Number

59-3468609

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**DEMBOSKY, WALTER J
215 CORAL DR.
CAPE CANAVERAL FL 32920**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3996 DUNDEE DRIVE

83

84 City

MERRITT ISLAND

FL

85 Zip Code

32953

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, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **DEMBOSKY, WALTER J**
STREET ADDRESS **215 CORAL DR.**
CITY-ST-ZIP **CAPE CANAVERAL FL 32920**

TITLE **D** ☐ DELETE

NAME **LACHANCE, WILLIAM T**
STREET ADDRESS **101 CAPE SHORES DR.**
CITY-ST-ZIP **CAPE CANAVERAL FL 32920**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3996 DUNDEE DRIVE

MERRITT ISLAND FL 32953

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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.

SIGNATURE

CR2E034 (10/97)