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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000104306 (0)

BRITAM ENGINEERING SERVICES, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



19110 GULF BOULEVARD #7 INDIAN SHORES FL 33785		19110 GULF BOULEVARD #7 INDIAN SHORES FL 33785				DO NOT WRITE IN THIS	SPACE	<i>:</i>	
•						3. Date Incorporated or Qualified 12/11/1997	0.7100	<u>-</u>	
2. Principal P 21 78 00	lace of Business	2a. Mailing Address 26				4. FEI Number 59-34-81325			plied For t Applicable
	re 202	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional quired
	INOLE FL.	City & State				Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip 24 337	72 25 USA.	Zip 29	30			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		91	Name	10. Name and Address of New Registered	Agent		
HAWKINS, DAVID J				"	ivallie				
19110 GULF BOULEVARD #7 Indian Shores FL 33785				82 Street Address (P.O. Box Number is Not Acceptable)					
			ľ	13					
			8	4	City	FL	85	Zip C	ode
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 epplicable (NOTE: Register				gent	signature req	quired when reinstating) DATE	DIDE	<u> </u>	0.01.40
12.	\$DVT	DIRECTORS	13.	<u>. </u>	—т	ADDITIONS/CHANGES TO OFFICERS AN	Ch		Addition
NAME	HAWKINS, DAVID J	C OFFICE	1.2 NAM		ľ		L On	ungo	LLI MOONIO
STREET ADDRESS	19110 GULF BOULEVARD #7		1.3 STRE		OORESS				
CITY-ST-ZIP	INDIAN SHORES FL 33785			1.4 CITY-ST-ZIP					
TITLE				2.1 TITLE			Ch	ange	Addition
NAME	HAWKINS, DAVID J		2.2 NAME						
STREET ADDRESS	19110 GULF BOULEVARD #7		2.3 STR		DRESS				
CITY-ST-ZIP	INDIAN SHORES FL 33785		2. 4 CITY-ST-ZIP						
TITLE	DELETE 3			3.1 TITLE			L Ch	ange	☐ Addition
NAME			3.2 NAM	3					
STREET ADDRESS			3.3 STRE		l l				
CITY-ST-ZIP				-ST-	ZIP		☐ Chi		Addition
TITLE NAME			4.1 TITLI 4. 2 NAM		Ī			anyc	L AUGINO
STREET ADDRESS			4. 2 NAM		DDECC				
CITY-ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 TITLE		-		Ch	ange	Addition
NAME		_	5.2 NAM					-	
STREET ADDRESS			5.3 STRE	ET AD	DRESS				- 1
CITY-ST-ZIP			5.4 CITY	- 51 - 2	ZIP				
TITLE		DELETE	6.1 TITLE	:			☐ Cha	ange	☐ Addition
NAME			6.2 NAM	E	1				
STREET ADDRESS			6.3 STRE	ET AD	ORESS				
CITY-ST-ZIP			6.4 CITY	- ST - 2	žiP				

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 attact them with an address.

DAVID HALKIN

2/15/08