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

| COR ANNU | PROFIT DRPORATION Sandra F MOTERM Secretary of State DIVISION OF CORPORATIONS | | | | FILED 98 JUN - 5 PM 3: 52 | | | | |
|--|---|--|---------------|--|---------------------------|--|---|-----------------------|---|
| 1. Corporation | MENT # PO Name Engineering, in | 9700010899 C. | 36 (0) |) | | | SECRETARY C TALLAHASSEE | F STATE | A |
| Principal Place 9911 82ND \$1 LARGO FL 33 | REET | Mailing Ac 9911 82N LARGO F | D STREET | | | | DO NOT WRITE If 3. Date Incorporated or Qualified | | |
| 2. Principal Pla 21 Suite, Apt. 4 | ace of Business | 2a. Mailing 26 | | | | | 12/29/1997 4. FEI Number 59-30194.53 | 00 | Applied For Not Applicable |
| City & State | City & State | | | | | | 6. Election Campaign Financing | \$! | .75 Additional Fee Required 5.00 May Be |
| 23 Zip 24 | Country 25 | 28 Zip 29 29 s of Current Registered A | 7 ip Counti | | | | Trust Fund Contribution 8. This corporation owes or has paid Personal Property Tax due June 3: 10. Name and Address of New Regi | the current ye | . No |
| LARGO FL 33777 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-namoffice or registered agent, or both, in the State of Florida. Such change was authorized by the agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE | | | | | | corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered | | | |
| | | registered agost and title if applicab- ICERS AND DIRECTORS | DELETE | E: Registered A. 13. 1.1 TITLE | | required | whon reinstating) ADDITIONS/CHANGES TO OFFICE | DATE RS AND DIRE CH | |
| NAME STREET ADDRESS CITY-ST-ZIP | _ | | | 1.2 NAMI | ET ADDRESS | A19 | in Highly il 9200 st. N. 30, Fl. 23777 | | DOECOS (|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | DELETE | 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY | ET ADDRESS | | | T∐ Cr | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | DELETE | 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4. CITY | ET ADDRESS | | 7000255 -06/09/98 ****150. | 527月 301060 *** | ang |
| NAME STREET ADDRESS CITY-ST-ZIP | | | DELFTE " | 4.1 TITLE 4. 2 NAM 4.3 STREI 4.4 CITY | E Et address | | | Cr | nange |
| NAME STREET ADDRESS CITY-ST-ZIP | | | □ DELFTE | 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY | ET ADDRESS | | | Ch | nange Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | artify that the information | | DELETE | 6 1 TITLE 62 NAMI 6.3 STREE | T ADDRESS S1-ZIP | ed in Se | ction 139 07/3/ii) Florida Statutes Thu | other christy to | |
| 14. Thereby 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 daily, that I am an officer of director of the corporation for the receiver or trustice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address. | | | | | | | | | |