PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV 12 PM 6:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000056683**

1. Corporation Name

GLOBAL ENGINEERING GROUP, INC.

Principal Place of Business	Mailing Address
2222 PONCE DE LEON BLVD., SIXTH FLOOR CORAL GABLES FL 33134	2222 PONCE DE LEON BLVD., SIXTH FLOOR CORAL GABLES FL 33134

If any of the above are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 5001 A.Q.74TH CT.STE.210	Suite, Apt. #, etc. 5001 S.W. 74TH CT.
City & State MIAMI, FLORIDA	City & State STE.210 MIAMI, FLORIDA
Zip 33155 Country	Zip 33155 Country

4. Date Incorporated or Qualified To Do Business in Florida: 06/23/1998

5. FEI Number: 65-0864382 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

100000305270 1--3
-11/23/99--01026--003
*****8.75 *****8.75

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City, State, Zip
D	PACINI, MILDRED E PRESIDENT	5001 S.W. 74TH COURT, SUITE 203	MIAMI FL 33155
	ANDRES A. ESPINOSA/VICE-PRESIDENT	11830 S.W. 108 Terrace	Miami, Florida 33186
	OMAR A. CHAVEZ /SECRETARY	4730 Santa Maria Street	Coral Gables, Florida 33146
	DORA RODRIGUEZ/ TREASURER	10024 S.W. 78th Court	Miami, Florida 33186

REINSTATEMENT 99 ; 1 TS

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
~~FOGMAN, TODD A, ESQUIRE~~ ~~2222 PONCE DE LEON BLVD., SIXTH FLOOR~~ ~~CORAL GABLES FL 33134~~ X OMAR A. CHAVEZ 4730 SANTA MARIA ST. CORAL GABLES, FLORIDA 33146	Name: 100000305270 1--3 Street Address (P.O. Box Number is Not Acceptable): -11/23/99--01026--004 ****750.00 ****750.00 Suite, Apt. #, Etc. City: State FL Zip Code

CR2E040 (8/99)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of New Registered Agent: Omar A. Chavez Date

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [signature] 11-08-99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0090012 AF