

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90039 030 ***150.00

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1. Entity Name

GLOBAL ENGINEERING GROUP, INC.



Principal Place of Business

5001 S.W. 74TH CT.
STE. 200
MIAMI FL 33155

Mailing Address

5001 S.W. 74TH CT.
STE. 200
MIAMI FL 33155



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0864382

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHAVEZ, OMAR A
4730 SANTA MARIA ST
CORAL GABLES FL 33146

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME PACINI, MILDRED E
STREET ADDRESS 5001 SW 74TH COURT SUITE 200
CITY-ST-ZIP MIAMI FL 33155

TITLE S ☐ Delete
NAME CHAVEZ, OMAR A
STREET ADDRESS 4730 SANTA MARIA STREET
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE T ☐ Delete
NAME RODRIGUEZ, DORA
STREET ADDRESS 10024 S.W. 78TH COURT
CITY-ST-ZIP MIAMI FL 33156

TITLE VP ☐ Delete
NAME CHAVEZ, OMAR A JR.
STREET ADDRESS 1717 NORTH BAYSHORE DRIVE UNIT 2452
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME CHAVEZ OMAR A
STREET ADDRESS 4730 SANTA MARIA STREET
CITY-ST-ZIP CORAL GABLES FLORIDA 33146

TITLE VP ☒ Change ☐ Addition
NAME CHAVEZ OMAR A JR.
STREET ADDRESS 4730 SANTA MARIA STREET
CITY-ST-ZIP CORAL GABLES FLORIDA 33146

TITLE S ☒ Change ☐ Addition
NAME PACINI MILDRED E
STREET ADDRESS 5001 S.W. 74TH COURT SUITE 200
CITY-ST-ZIP MIAMI FLORIDA 33155

TITLE T ☒ Change ☐ Addition
NAME DORA RODRIGUEZ
STREET ADDRESS 10024 S.W. 78TH COURT
CITY-ST-ZIP MIAMI, FLORIDA 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAN 30/06 (305) 661-0057