

FILED
May 14, 1999 8:00 am
Secretary of State

05-14-1999 90003 046 ***450.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000083152

1. Corporation Name

PYRAMID ENGINEERING SERVICES, INC.

Principal Place of Business 95 E MITCHELL HAMMOCK RD. SUITE 201 OWIEDO, FL 32765	Mailing Address 95 E MITCHELL HAMMOCK RD. SUITE 201 OWIEDO, FL 32765
1420 ACAFAYA TRAIL, SUITE 200 OWIEDO, FL 32765	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Country 29	Zip 30

3. Date Incorporated or Qualified

09/25/1998

4. FEI Number

59-3541512

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

B. Name and Address of Current Registered Agent

YANG, TYNG-LIN**95 E MITCHELL HAMMOCK RD, SUITE 201****OWIEDO, FL 32765****1420 ACAFAYA TRAIL, SUITE 200
OWIEDO, FL 32765**

10. Name and Address of New Registered Agent

81 Name

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

84 City

FL

85 Zip Code

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

TYNG-LIN YANG
 (NOTE: Registered Agent signature required when reinstating)

DATE

4/30/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YANG, TYNG-LIN	1.2 NAME	
STREET ADDRESS	95 E. MITCHELL HAMMOCK ROAD, SUITE 201	1.3 STREET ADDRESS	
CITY-ST-ZIP	OWIEDO, FL 32765	1.4 CITY-ST-ZIP	
TITLE	1420 ACAFAYA TRAIL <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUITE 200	2.2 NAME	
STREET ADDRESS	OWIEDO, FL 32765	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TYNG-LIN YANG

Date

4/30/99

Daytime Phone #

365-7374

CR2E034 (1/98)