

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

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AND
FILED

99 AUG 20 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMENDED
PROFIT
CORPORATION
ANNUAL REPORT
1999

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

DOCUMENT # P98000095324

1. Corporation Name

Applied Engineering South Florida Corporation

Principal Place of Business

301 E. Ocean Blvd.
Suite 210
Stuart, FL 34994

Mailing Address

301 E. Ocean Blvd.
Suite 210
Stuart, FL 34994

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

November 12, 1998

4. FEI Number

65-0874295

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

Corporate Creations Enterprises, Inc.
4521 PGA Blvd., #211
Palm Beach Gardens, FL 33418

10. Name and Address of New Registered Agent

81 Name
William C. McIntyre, P.A.
82 Street Address (P.O. Box Number is Not Acceptable)
3561 S.W. Corporate Parkway

83
84 City
Palm City

85 Zip Code
FL 34990

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

(NOTE: Registered Agent signature required when retreating)

8/5/99

12. OFFICERS AND DIRECTORS

TITLE D
NAME Nangle, Thomas
STREET ADDRESS 23 South Ridgeview Road
CITY-ST-ZIP Stuart, FL 34996

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/S/D
1.2 NAME Kraft, Robert
1.3 STREET ADDRESS 301 E. Ocean Blvd., Suite 210
1.4 CITY-ST-ZIP Stuart, FL 34994

2.1 TITLE V/D
2.2 NAME Biondo, Charles
2.3 STREET ADDRESS 301 E. Ocean Blvd., Suite 210
2.4 CITY-ST-ZIP Stuart, FL 34994

3.1 TITLE T
3.2 NAME Kraft, James
3.3 STREET ADDRESS 301 E. Ocean Blvd., Suite 210
3.4 CITY-ST-ZIP Stuart, FL 34994

4.1 TITLE
4.2 NAME 500002974855--0
4.3 STREET ADDRESS -08/31/99--01057--003
4.4 CITY-ST-ZIP *****61.25 *****61.25

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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

8/5/99 (567) 221-9595

CR2E034 (11/98)