2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004
Secretary of State

DOCUMENT# P99000017383

Entity Name: FIRE-RAM ENGINEERING & CONSULTING GROUP, INC.

Current Principal Place of Business:

222 POINCIANA IS. DR
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

222 POINCIANA IS. DR
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 65-0949296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHILLING, DAWN
222 POINCIANA ISLAND DR
SUNNY ISLES BCH, FL 33160 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: LORENZO, MANUEL JR
Address: 3951 SW 145 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: V ( ) Delete
Name: POOLE, JACK
Address: 1317 S. FOUNTAIN DR.
City-St-Zip: OLATHE, KS 66061

Title: PT ( ) Delete
Name: SCHILLING, WILLIAM Q
Address: 222 POINCIANA ISLAND DR.
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: SCHILLING, DAWN
Address: 222 POINCIANA ISLAND DR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM QUINN SCHILLING PT 01/27/2004

Electronic Signature of Signing Officer or Director — Date