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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$10033

(6)

MASTIFF ENGINEERING CORPORATION

Principal Place of Business Mailing Address 11306 SW 111TH CT. RD. 11306 SW 111TH CT. RD. MIAMI FL 33176 MIAMI FL 33176-3804 US US			D.	***************************************		
					3. Date Incorporated or Qualified 10/31/1990	3a. Date of Last Report 10/11/1996
2. Principal 21	Flace of Business	2a, Mailing Address 26		***************************************	4. FEI Number 65-0224132	Applied For Not Applicable
Suite Apt. #, etc 22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta 23		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	Gouni 30	ry		X Yes No
hr.	9. Name and Address of Cu	irrent Hegistered Agent		1 Name &	10. Name and Address of New R	agistered Agent
REYES, ANTONIO 11308 SW 11 CT. RD.				K	EYES, ANTONIO	
MIAMI FL 33186			8	2 Street Add	dress (P.O. Box Number is Not Accepta	,ble) On .
	rum i e so iso		8	3	200 200 111 01	
				4 City		Inc. Tip Code
) \			NAMI	FL 35/76
11. Pursuan office or agent I	it to the provisions of Sections 60 leg stored agent, or both, in the s am familiar with, and a contribute	.0502 and 607.1503, Florida Stat Strie of Florida. Such change wa Angations of, Section 607.0505,	utes, the abo s authorized Florida Statul	ove-named cor by the corpora ies.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered
SIGNATI	Signature, typic dior printed national register	d agony and tide if apply able (N	over Desired		uired when reinslating)	
12.	1	AND DIRECTORS	13.	agent signature reti	ADDITIONS/CHANGES TO OFFI	
TOTLE	DR	☐ DELETE	1.1 TITL	: T		Change Addition
NAM {	REYES, ANTONIO		1.2 NAM	E		
STREET ADDRESS			1.3 STRE	ET ADDRESS		
CHY+S1+ZIP	MIAMI FL		1.4 CITY	-ST-ZIP		
THTLE	ST SEVEN AND AND ASSESSED OF THE SEVEN ASSESSED OF THE SEVEN AND ASSESSED OF THE SEVEN ASS	☐ DELETE	21 TITE	E		☐ Change ☐ Additio
NAME	REYES, ANMARIE		2 2 NAM	E		
STREET ADDRESS				ET ADDRESS	:	•
City-St-ZiP	MIAMI FL 33176	I DELETE		r-st-zip		Change Addition
TITLE	1	∐ DELETE	3.1 TITL	t I		LIJ URANDE LIJ AOOMIO

14. I do 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 is use and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of director of traccorporation 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 on a reachment with an address.

32 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-2IP

3.4. CITY-ST-ZIP

SIGNATURE

NAMi

HILE

NAME STREET ADDRESS

1111.6

NAMI

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

C!TY - ST - ZIP

STREET ADDRESS CITY+S1+ZIP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/1997

252-83/9 Daytime Priore #

Change

☐ Change

Change

Addition

Addition

Addition

FILED

Feb 06 1997 8:00am

Secretary of State