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

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FILED Mar 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S10033 (6)MASTIFF ENGINEERING CORPORATION Principal Place of Business Mailing Address 11308 SW 111TH CT. RD. 11308 SW 111TH CT. RD. MIAMI FL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 10/31/1990 4. FEI Number 2. Principal Place of Business Applied For 12490 SW 95 65-0224132 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Miami Trust Fund Contribution 28 Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Ager 10. Name and Address of New Registered Agent Name REYES, ANTONIO 11888 SW-111-COURT ROAD 12480 SW 95 Terr 82 Street Address (P.O. Box Number is Not Acceptable) -MIAMI FL-83176--Mami, 1233186 83 84 City gistered agent, or both, in the State of familiar with, and accept the chilga Pursuant to office or re ove-named corporation submits this statement for the purpose of changing its registered to by the corporation's board of directors. I hereby accept the appointment as registered agent. I SIGNATUR Stanature, typed or postud ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. AND DIRECTORS DELETE Change TITLE REYES, ANTONIO 1.2 NAME NAME 11988 6W 111TH GT 1.3 STREET ADDRESS 12480 SW 95 Terr. STREET ADDRESS MIAMI FI Miami, FC 33186 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition REYES. ANMARIE 2.2 NAME NAME -11308-S.W.-111-00URT--12480 SW 95 Terr Mami, PC 33186 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33178-2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-\$1-2IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Change Addition 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the info lify for the exemption stated in Seindicated on this annual report or supproficer or director of the corporation or d accurate and that my signature ed to execute this report as required.