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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27 1997 8:00am

Secretary of State

941-643-0157

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S20431

(0)

STONEHOUSE ENGINEERING SERVICES CORP.

Principal Place of Business Mailing Address					L TERRIBUR STA DINIH DOLLH BIDRA DUNUL DU	il gibit fibit bibit bibit bibit		
2329 LONGBOAT DRIVE NAPLES FL 34104-3325 US 2329 LONGBOAT DRIVE NAPLES FL 34104-3325 US								
					3. Date Incorporated or Qualified			
					01/01/1991	02/15/1996		
	Place of Business	2a, Mailing Address			4. FEI Number	Applied For		
21 <b>SA</b> r		26 SAME	Suite, Apt. #. etc.			65-0235854 Not Applicable		
Suite, Apt #, etc			27			5. Certificate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing		00 May Be	
23		28			Trust Fund Contribution		ed to Fees	
Zip Country		Zφ				8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30		Florida Statutes	Yes X No		
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New I	legistered Agent		
HAU	stein, norman		8	1 Name				
2329 LONGBOAT DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)				
NAP								
			8	3				
			8	4 City		85 Z	ip Code	
			L			FL ° '		
office or r	to the provisions of Sections 607.6 registered agent, or both, in the St. am familiar with, and accept the ob-	ate of Florida. Such change was a	authorized l	by the corp	corporation submits this statement for the oration's board of directors. I hereby acc	ept the appointment	as registered	
SIGNATURE	Signature, type-for proden name of region and	WOT	r 6		required when reinstating)	DATE		
12.		AND DIRECTORS	13.	geni signature i	ADDITIONS/CHANGES TO OF		ORS IN 12	
TITLE	PST	DELETE	1,1 T(TLE		7,001110110/010111010110	Chang		
NAME	HAUSTEIN, NORMAN	<del></del>	1.2 NAM	1		<del></del> "		
STREET ADORESS	2329 LONGBOAT DR.			ET ADDRESS				
CITY - ST - ZIP	NAPLES FL 34104		1.4 CITY	-ST-ZIP				
TITLE		DELETE	2 1 TITLE			Chang	ge Addition	
NAME			22 NAM	E Ì				
STREET ADDRESS			2 3 STRE	ET ADDRESS				
CITY-ST-ZP			2. 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE	.		Chang	je 🔲 Addition	
NAME			3.2 NAM	E				
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY-ST-2IP			3.4. CITY					
TITLE		L_  DELETE	41 TITLE	ì		Chang	ge Addition	
NAME			4. 2 NAM					
STREET ADDRESS				ET ADDRESS				
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TITLE		☐ DELETE	5.1 TiffLE	1		C Cliana	, D AVGIOUIT	
NAME			5.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY+S1+ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE			[] Chanc	ne Addition	
NAME		hand Decent	6.7 THE	1		والوالي في		
STREET ADDRESS				ET ADDRESS				
			64 CITY					
CHV -\$1 - 712 14. 1 do here	1 by certify that the information such	blied with this filing does not quali			ated in Section 119.07(3)(i), Florida Statu	tes. I further certify the	nat the	
Lam an c		n or the receiver or trustee empow	vered to exe	ecute this re	that my signature shall have the same le eport as required by Chapter 607, Florida			