

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V03707** (9)

1. Corporation Name

J. BRAVO ENGINEERING AND CONSULTING, INC.



Principal Place of Business

P.O. BOX 187
PANAMA CITY FL 32401

Mailing Address

P.O. BOX 187
PANAMA CITY FL 32401

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

BRAVO, JOHN E
125 HAMILTON AVE
PANAMA CITY FL 32401

3. Date Incorporated or Qualified

01/02/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3178575

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 date of signature

(If the Registered Agent's signature is required when filing this report)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

P
NAME **BRAVO, JOHN E.**
STREET ADDRESS **125 HAMILTON AVENUE**
CITY-ST-ZIP **PANAMA CITY FL 32401**

☒ DELETE

V
NAME **BRAVO, SUSAN J**
STREET ADDRESS **125 HAMILTON AVE**
CITY-ST-ZIP **PANAMA CITY FL**

☒ DELETE

T
NAME **ROGERS, TABITHA L**
STREET ADDRESS **7827 HOVERING MIST WAY**
CITY-ST-ZIP **JACKSONVILLE FL**

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

P, S, T
NAME **BRAVO, JOHN E.**
STREET ADDRESS **125 HAMILTON AVENUE**
CITY-ST-ZIP **PANAMA CITY, FL 32401**

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

904/769-2853

Daytime Phone #

CR2E034 (12/95)