FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
AND
FILED

95 MAR 17 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V61519** **(7)**

1. Corporation Name
A & M ENGINEERING CONSULTANTS, INC.

Principal Place of Business	Mailing Address
6717 BANNER LAKE CIRCLE SUITE 11202 ORLANDO FL 32821	6717 BANNER LAKE CIRCLE SUITE 11202 ORLANDO FL 32821

2. Principal Place of Business: 21 1800 BARDMOOR HILL CIR.	2a. Mailing Address: 26 P.O. BOX 960605
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ORLANDO, FLA	City & State 28 ORLANDO, FL
Zip 24 32835 Country 25 USA	Zip 29 32869-0605 Country 30 USA

3. Date Incorporated or Qualified: 09/03/1992
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-3139984 — 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 [X] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HICKS, KIMBERLY M. 6717 BANNER LAKE CIRCLE SUITE 11202 ORLANDO FL 32821	81 Name: KIMBERLY M. HICKS 82 Street Address (P.O. Box Number is Not Acceptable): 1800 BARDMOOR HILL CIR. 83 84 City: ORLANDO FL 85 Zip Code: 32835

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	TITLE	P. [X] Change [ ] Addition
NAME	HICKS, MICHAEL A.	NAME	Michael A. Hicks
STREET ADDRESS	6717 BANNER LAKE CIR.	STREET ADDRESS	P.O. BOX 960605 N/A
CITY-ST-ZIP	ORLANDO FL	CITY-ST-ZIP	ORLANDO, FLA. 32869-0605
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	900001437939
STREET ADDRESS		STREET ADDRESS	-03/23/95--01054--014
CITY-ST-ZIP		CITY-ST-ZIP	****208.75 ****208.75
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	AP 3/22
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael A. Hicks, MICHAEL A. HICKS, 3/13/95 (407) 521-4419
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0004463 CP