

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002475

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: SBLM ARCHITECTS P.C.

## Current Principal Place of Business:

151 WEST 26TH ST.  
2ND FL  
NEW YORK, NY 10001

## New Principal Place of Business:

## Current Mailing Address:

11430 N. KENDALL DR.  
SUITE 310  
MIAMI, FL 33176

## New Mailing Address:

FEI Number: 13-3723374      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COHEN, JAMES  
11430 N. KENDALL DR.  
SUITE 310  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BURDICK, JOSHUA  
Address: 151 WEST 26TH ST., 2FL  
City-St-Zip: NEW YORK, NY 10001

Title: VP ( ) Delete  
Name: COHEN, JAMES  
Address: 11430 N. KENDALL DR., STE 310  
City-St-Zip: MIAMI, FL 33176

Title: S ( ) Delete  
Name: MAGNUSON, PHILIP  
Address: 151 WEST 26TH ST., 2 FL  
City-St-Zip: NEW YORK, NY 10001

Title: VP ( ) Delete  
Name: LEFANDE, MICHAEL  
Address: 151 WEST 26TH ST., 2 FL  
City-St-Zip: NEW YORK, NY 10001

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES COHEN

VP

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date