\sim
0
0
_
Ξ
8
õ
ш
Š
Œ.
\circ
_

FILED

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

SIGNATURE:

Jul 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # LO4809 KHULY ARCHITECTS ASSOCIATES, INC. Principal Place of Business 7481 SW 50TH TERR 7481 SW 50TH TERR MIAMI, FL 33165 DO NOT WRITE IN THIS SPACE MIAMI, FL 33155 3. Date Incorporated or Qualified 07/27/1989 4. FEI Number 45-0136814 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 21 Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Zıp Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 🔀 Yes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Khuly, Margarita A. Street Address (P.O. Box Number is Not Acceptable) 7481 SW SOTH TERR 83 MIAMI, FL 35155 R4 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 regulated agent and title if applicable (NOTE_flogistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE Change Addition TITL€ 1.1 THILE Khuly, MARGARITAA. 7481 SW SO TERR NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-2IP 1 4 CITY - ST - ZIP DELETE ☐ Change Ado tion TITLÉ 2.1 TITLE NAME Knuly, Jorge 2.2 NAME MIAMI, FL 23155 STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - S1 - ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 C(TY - S1 - Z)P CITY - ST - ZIP DELETE Change Add tipn TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST-7IP 4.4 CITY - \$1-7IP DELETE Change Addit on TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7F 5.4 CITY - S1 - ZIP DELETE mur Change Addition 61111116 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 463 14. Thereby certify that the information supplied with this firing does not qualify for the exemption stated in Section 119.07(3)(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 logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted any ownered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed an any attack near the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted any ownered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed an any attack near the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver of the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted any officer or director of the corporation or the receiver of the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver of the corporation of the receiver of the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver of the corporation of the receiver of the same logal effect as if made under eath; that I am an officer or director of the corporation of the receiver of the corporation of the receiver of the same logal effect as if the same logal effect as

ED NAME OF SIGNING OFFICER OR DIRECTOR

Aida E. Briele & Associates, P.A.

Certified Public Accountants

June 16, 1998

Division of Corporations Annual Reports Section P. O. Box 6237 Tallahassee, FL 32314

<u>RE:</u> Khuly Architects Associates, Inc. Document #: L04809

To whom it may concern:

The above referenced client requested we write to inform you that they never received the original 1998 Annual Report. In a recent conversation with our client we realized the problem and promptly contacted your offices to send us the form.

We acknowledge the Annual Report is late but we deem our client should not be burden with the hardship of the late filing fee since the situation was beyond their control. We respectfully request you abate any penalties related to this filing.

Herewith we enclosed a check for \$158.75, the annual fee plus the fee for a copy of the Certificate of Status. We thank you in advance for your assistance in this matter and if you have any questions regarding this matter please do not hesitate to contact us.

Sincerely,

E. Beatriz Echeverria, CPA