FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90184 048 ***158.75

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L04809

1. Corporation Name

KHULY A	ARCHITECTS ASSOCIATES,	INC.						
								IBIN BININ 1881
Principal Place 7481 SW 50TH MIAMI FL 33155	TERR	Mailing Address 7481 SW 50TH TERR MIAMI FL 33155		DO NOT WRITE IN TH	IS SPACE	,		
						Date Incorporated or Qualifed		
						07/27/1989		ļ
Principal Place of Business 2a. Mailing Address				_		4. FEI Number	Apr	plied For
21		26	26			65-0136814	Nof	Applicable
Suite, Apt.	¥, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22						5. Certificate of Status Desired	Fee Red	quired
City & State)	City & State				6. Election Campaign Financing	\$5.00	
23		28				_ Trust Fund Contribution	Added to	o Fees
Zip				ry		8. This corporation owes the current year	ntangible	⊠ No
24	25	29 36	0			Personal Property Tax.		NO
9. Name and Address of Current Registered Agent				1	Name	10. Name and Address of New Registere	a Agent	
KHULY, MARGARITA A.				'']	110110		<u> </u>	
7481 SW 50TH TERR			8	2	Street Addr	ress (P.O. Box Number is Not Acceptable)	•	
MIAMI FL 33155			8	3	 			
•			٦			<u></u>		
				4	City	F		
11. Pursuant office or reagent. Lar	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligations.	2 and 607.1508, Florida Statutes of Florida. Such change was auth tions of, Section 607.0505, Florid	, the abo horized b la Statute	ove- oy tl	named corp he corporation	ooration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as rec	registered gistered
SIGNATURE								
	Signature, typed or printed name of registered ager			gent	signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DS IN 12
12.		ID DIRECTORS	13.		-	ADDITIONS/CHANGES TO OFFICERS	Change	["] Addition
TITLE	PD						Gridings	
NAME	KHULY, MARGARITA A.							
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155	DELETE	1.4 CITY+		-ZIP		☐ Change	Addition
TITLE	VSD	□ pere ie						
I NAME	KHULY, JORGE 7481 SW 50TH TERR		2.2 NAME					<u> </u>
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			2.4 CITY 3.1 TITLE	CITY-ST-ZIP			☐ Change	Addition
TITLE		רו מנונינ	3.1 THE					
NAME					ADDRESS			
STREET ADDRESS				STREET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		-2F		Change	☐ Addition
NAME		<u></u>	4. 2 NAM				•	
			1		ADDRESS			
STREET ADDRESS			4.3 3 RE					
			5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAMI					

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 legal effect as if made under oath; that I am an officer or director of the corporation of 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 an appear of the proposed 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 an appear of the proposed to execute this report as required by Chapter 607.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: X

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

☐ Addition