## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9600078295  1. Entity Name  JAMES E. TOTH, ARCHITECTURE, INC.					Secretary of State 04-09-2002 90054 004 ***150.00				
Principal Place -8653 CORTEZ -BRADENTON	ROAD WEST STE 100	Mailing Address  3653 CORTEZ ROAD WEST STE 108  BRADENTON FL 34210			1 H <b>a b</b> i y <b>a b</b> i y i <b>a</b> 1 <b>i a</b>	A ARRI ABDR BARR ABDR ABDR	(): ( <b>1858</b> ): <b>(8</b> 11 <b>8</b> /1 <b>878</b>	18181 BIH 1881	
6 D:-:(F	None of Dissipance						)]]]]]		
9//	lace of Business 37H \$7, WE\$7	3. Mailing Address P. 0. B. 1158							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat	ENTON, FL	BRADEN TON, FL			4. FEI Number 65-0698608 Applied For				
Zip	Country	Zip . Country			5 Certificate of Status Desired Status Period Perio				
3420	6. Name and Address of Current R					7. Name and Address of New Registered Agent			
TOTH, JAMES E  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  PRADENTON FL 34249  City   13 74 STREET WEST  City   13 74 STREET WEST  City   13 74 STREET WEST  Tan Code 34205  8. 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 Signature Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  A 2/16/2002  DATE							12		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta		50.00		ampaign Financing Contribution.		O May Be to Fees	
11.	OFFICERS AND D		12.	A	DDITIONS/CHANG	ES TO OFFICERS AN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Toth, James E 3653 Cortez Road West Ste 1 Bradenton Fl 34210	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	911 13 BRA	3 TH STR	CEET WES	Change T 205	Addition	
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indicated of the cor	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower or on an attackment with an address, we	rue and accurate and that my rered to execute this report as	signature shall ha	ave the same	e legal effect as if m	hade under oath; that	I am an officer	or director Block 12 if	