Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90298 040 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062852

	ames prandini	, architec	T, PA									
Principal Place	e of Business		Mailing Address		-		- !!!		1111 BW(1) BB(1	/B 01110 11001 10101 0	JJ18 3191 1891	
13406 SW 128 STREET 13406 SW 128 STREET												
MIAMI FL 33186 MIAMI FL 33186								DO NOT WRITE IN THIS SPACE				
								corporated or Qualifed				
							07/21				Fad Fac	
	lace of Business		2a. Mailing Address				4. FEI Nu	68906			lied For Applicable	
Suite, Apt.	# oto		Suite, Apt. #, etc.				05-07	00300		\$8.75 A		
22	#, etc.		27				5, Certifo	ite of Status Desired		Fee Rec		
City & State	<u></u>		City & State				e Electio	Campaign Financing		\$5.00	Jav Be	
23	•		28					und Contribution		Added to	•	
Zip	Cour	try	Zip	Co	untry		a. This co	rporation owes the cui	rent year	ntangible		
24	25		29	30				al Property Tax.			□No	
	9. Name and Add	ess of Current	Registered Agent	1			10. Name	and Address of New	Registere	d Agent		
				_	81	Name						
PF:ANDINI, CRAIG J					82	Stroot Ac	drass (P.O. Box	Number is Not Accep	table)			
13406 SW 128 STREET					"	SireerArt	31633 (1 .0. 00)	Man is not recop				
MIAN	11 FL 33186				83							
										. 85 Zip C	ode	
					84	City			F	L 85 Zip C	.500	
agent. ⊢ai SIGNATUFE	m familiar with, and ac	cept the obligati:	and 607.1508, Florida Statu f Florida. Such change was ons of, Section 607.0505, Flo and title if applicable (NOT	orida Sta	tutes	•	ired when reinstating)		DATE			
12.		OFFICERS ANI	DIRECTORS	13			ADDITI	NS/CHANGES TO O	FFICERS			
TITLE	D		☐ DELETE	1.1 7	ITLE					☐ Change	☐ Addition	
NAME	PRANDINI, CRAIG	J		1.2 h	IAME							
STREET ADDRESS	13406 SW 128 ST	reet		1.3 5	TREET	TADDRESS						
CITY-ST-ZIP	MIAMI FL 33186			1.4 0	HY-S	T-ZIP						
TITLE			☐ DELETE	2.11	TLE					Change	☐ Addition	
NAME				2.21	IAME							
STREET ADDRESS				2.3 9	TREE	T ADDRESS						
CITY-ST-ZIP				2.4	СПҮ-5	ST-ZIP						
TITLE			☐ DELETE	3.17	ITLE					Change	Addition	
NAME				3.21	IAME							
STREET ADDRESS				3.3 \$	TREE	T ADDRESS						
CITY-ST-ZIP				34.	CITY- S	ST-ZIP						
TITLE			☐ DELETE	4.1	ITLE					☐ Change	☐ Addition	
NAME				4. 2	NAME							
STREET ADDRESS				4.3 9	TREE	T ADDRESS						
CITY-ST-ZIP				4.4 (CITY-S	T-ZiP						
TITLE			☐ DELETE	5.1	TITLE					☐ Change	☐ Addition	
NAME				5.21	NAME							
STREET ADDRE 3S				5.3	STREE	TADDRESS						

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 or the repenter 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 changes, or on an affact ment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

□ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

m/saud TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

233-7239

☐ Change

___ Addition