

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 582636 (7)

1. Corporation Name
CUHACI & PETERSON, ARCHITECTS, INC.

Principal Place of Business 200 E. ROBINSON ST. #400 ORLANDO FL 32801-8955	Mailing Address 200 E. ROBINSON ST. #400 ORLANDO FL 32801-8955
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1220 Alden Road Suite, Apt. #, etc. City & State 23 Orlando, FL Zip Country 24 32803-2546 25 US		2a. Mailing Address 26 1220 Alden Road Suite, Apt. #, etc. City & State 28 Orlando, FL Zip Country 29 32803-2546 30 US		3. Date Incorporated or Qualified 08/17/1978	4. FET Number 59-1934871	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees

g. Name and Address of Current Registered Agent PETERSON, LONNIE G 200 E. ROBINSON #400 ORLANDO FL 32801				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1220 Alden Road 83 84 City Orlando FL 85 Zip Code 32803-2546			
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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 within 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]* **Lonnie G. Peterson/President** 4/22/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUHACI, EDWARD J	1.2 NAME	
STREET ADDRESS	55 METCALFE ST. #1150	1.3 STREET ADDRESS	
CITY-ST-ZIP	OTTAWA, ONT, CO 00000	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, LONNIE	2.2 NAME	Peterson, Lonnie G.
STREET ADDRESS	200 E. ROBINSON ST. #400	2.3 STREET ADDRESS	1220 Alden Road
CITY-ST-ZIP	ORLANDO, FL 00000	2.4 CITY-ST-ZIP	Orlando, FL 32803-2546
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 supplementary 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 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, unchanged, or as an attachment with an address.

SIGNATURE: *[Signature]* Lonnie G. Peterson, 4/22/98 (504) 228-1220

CR2E034 (10/97)