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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 614939

1. Corporation	on Name	•		
ARCH-N	IEER, INC.	-	•	
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Principal Plac	ce of Business	Mailing Address		
5000 OAKES F	ROAD	3233 HUNTINGTON		
SUITE F		FT. LAUDERDALE FL 33332		
FT. LAUDERDALE FL 33314 US				DO NOT WRITE IN THIS SPACE
03	·	•		3. Date Incorporated or Qualifed
				03/13/1979
	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-1940886 Not Applicable
Suite, Apt	i. #, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired \$8.75 Additional
22	<u> </u>	27		Fee Required
City & Sta	ite .	City & State		6. Election Campaign Financing S5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	. Zip	Country	8. This corporation owes the current year Intangible
24	25	29	30	Personal Property Tax. ☐ Yes ☐ No
	Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
		•	81 Name	
	SHONG, RICHARD		82 Street	t Address (P.O. Box Number is Not Acceptable)
	3 HUNTINGTON		Joe Street	Address (F.O. Dox Number is Not Acceptable)
FT.	LAUDERDALE FL 33332	•	83	· 100 100 100 100 100 100 100 100 100 10
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-			84 City	85 Zip Code
44 Diversal	t to the provisions of Sections 607 0503	and 607 1609. Florido Statuto	s the shous names	d corporation submits this statement for the purpose of changing its registered
I I a GIOGUIII	remintered accept or both in the Ctate a	and cor. 1000, I fortua Ctatule	3, the above-manner	2 corporation submitts this statement for the purpose of changing its registered [
" office or	registered agent, or both, in the State of	r Florida. Such change was au	thorized by the corp	poration's board of directors. I hereby accept the appointment as registered
agent. I	registered agent, or both, in the state of am familiar with, and accept the obligation	ons of, Section 607.0505, Flori	thorized by the corp da Statutes.	poration's board of directors. I hereby accept the appointment as registered
office or agent I a SIGNATURE				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Agent signature	required when reinstating); 34. U
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: I	Registered Agent signature	required when reinstating): 12 C DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: I	Registered Agent signature 13. 1.1 TITLE	required when reinstating); 34. U
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND P BUSHONG, RICHARD	and title if applicable. (NOTE: I	Registered Agent signature	required when reinstating): 32. 9. DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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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 receiver or trusted impowered 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 attachment with singledness with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

J. Bustone, PRES.

1/14/99

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90017 017 ***150.00

954-584-8770

Control Change

:R2E034 (11/98)