APR.27.2000 2:46PM

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 619970

Entity Name

ADACHE ASSOCIATES ARCHITECTS, P.A.

Principal Place of Business / Mailing Address

550 S. FEDERAL HIGHWAY
FT. LAUDERDALE, FLORIDA 33301

FILED
May 09, 2000 8:00 am
Secretary of State
05-09-2000 90132 026 ***150.00

B0087851

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: ~~550 S. FEDERAL HWY.~~
Suite, Apt. #, etc.
City & State: FT. LAUDERDALE, FL
Zip: 33301 Country: USA

3. Mailing Address: SAME
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number: 59-1918021 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DANIEL E. ADACHE
550 S. FEDERAL HIGHWAY
FT. LAUDERDALE, FLORIDA 33301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
City **FL** Zip Code

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) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHAIRMAN DANIEL E. ADACHE 550 S. FEDERAL HIGHWAY FT. LAUDERDALE, FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT GEORGE M. FLETCHER 550 S. FEDERAL HIGHWAY ~~FT. LAUDERDALE, FL 33301~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] 4/28/00 (954) 525-8133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #