

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000003084

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** WARSHAUER MELLUSI WARSHAUER ARCHITECTS, P.C.

**Current Principal Place of Business:**

7 SKYLINE DRIVE  
2ND FLOOR  
HAWTHORNE, NY 10532

**New Principal Place of Business:**

**Current Mailing Address:**

7 SKYLINE DRIVE  
2ND FLOOR  
HAWTHORNE, NY 10532

**New Mailing Address:**

**FEI Number:** 13-3074098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WARSHAUER, GARY D  
800 S. DOUGLAS ROAD  
SUITE 225, PUERTA DEL SOL BUILDING  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CT  
Name: WARSHAUER, GARY D  
Address: 7 SKYLINE DRIVE  
City-St-Zip: HAWTHORNE, NY 10532

Title: VCS  
Name: MELLUSI, VINCENT J  
Address: 7 SKYLINE DRIVE  
City-St-Zip: HAWTHORNE, NY 10532

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GARY DAVID WARSHAUER

CT

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date