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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

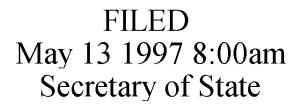
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F30643

(3)

DIMITER STOYANOFF ARCHITECT-PLANNER, INC.



City & State City & State 6. Election Campaion Financing \$5.00 May Re	Principal Place of Business Mailing Address  1055 EAST OCEAN BLVD STUART FL 34996 STUART FL 34996-2585														
2.	]														Report
Suite Apt #, etc.   Suite Apt #, etc.   Suite Apt #, etc.   23   27   27   27   28   27   28   27   29   29   29   29   29   29   29	—	Principal P	Place of Busin	oss	F1	<b></b> 1						4. FEI Number	1 00,	A	
27	[2]	Suite, Apt. #, etc.			26	<b>1</b>							. 🗀		
28	22	City & State			27								Fee F	lequired	
26	23	Ony & Otal	ony di diale			<b>⊢</b> '									
10. Name and Address of New Registered Agent   10. Name and Address of New Registered   10. Name and New Section   10. Name and Address of New Registered   10. Name and New Section   10. Name and New	24	Zip	<del>  -  </del>		20	h			intry	. This corporation has					
1085 EAST OCEAN BLVD STUART FL 33494    Bit   Pursuant to the provisions of Sections 607,0502 and 607,1508. Ficrida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the Skild of Florins. Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the Skild of Florins. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agont. In a final with, in and eccept the objective of Skildses.   Signature   Signatu									·						
STUART FL 33494    Bat   City												1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
11. Pursuant to the provisions of Sections 607.0502 end 607.1508. Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505. Florida Statutes, the above-harned corporations upmits this statement for the purpose of changing its registered agent									82 Street Addre			(P.O. Box Number is Not Acce	eptable)		
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08. Florida Statutes, the above-named corporation submits this statement for the purpose of change its registered agent, and account the obligations of Sections 607.05.02 and 607.15.08. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and account the obligations of Section 607.05.05. Florida Statutes agent. I am familiar with, and account the obligations of Section 607.05.05. Florida Statutes.  SIGNATURE    12.		510	AHI FL 334				83					<del></del>			
11. Pursuant to the provisions of Sections 607,0502 and 607.1508. Ficridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont amal amiliar with and accept the obligations of Section 607.0505, Florida Statutes.    Signature   Sig															
11. Pursuant to the provisions of Socions 607.0502 and 607.1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered application of position of the state of floridat Statutos.    12.										,			FL		
Signature   Sign	11	Pursuant office or r	to the provision	ons of Sections 607. ont, or both, in the S	.0502 and 6 tate of Flori	07.1508, Fi da, Such el	orida Statut hange was	pove d by	e-named co the corpor	orporat ration's	ion submits this statement for s board of directors. I hereby a	the purpose o	of changing pointment as	its registered s registered	
12	1		on rammar wit	n, and accept the o	Diigations o	t, Section 6	07.0505, FI	orida Stai	ules	S.		,			
TITLE	<u> </u>		Signature, lypod o				(NO)	d Age	nt signature red	quired wi					
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14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the	_		ou nortification	the internation and	والمسالة والمسالم	de Cilie e el	no mal a si P					140.07(0)(0) 5			

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 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 changed, or on an attachment with an address.

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