2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

FILED Apr 07, 2001 8:00 am Secretary of State **DOCUMENT # F47158** SINGER ARCHITECTS, INC. 04-07-2001 90016 013 ***158.75 Principal Place of Business Mailing Address %-DONALD-I-SINGER % DONALD I SINGER 13 WEST LAS OLAS BLVD. 13 WEST LAS OLAS BLVD. H0026088 FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address 13 West Las Olas 13 West Las Olas Blvd. Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State 59-2127487 Applied For Ft. Lauderdale Lauderda Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired. 33301 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARRY, CRAIG F Street Address (P.O. Box Number is Not Acceptable) 13 WEST LAS OLAS BLVD. FT LAUDERDALE FL 33301 Zip Code City FL 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 Fiorida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition TITLE ☐ Change Delete TITLE BARRY, CRAIG F NAME NAME STREET ADDRESS 13 W LAS OLAS BLVD STREET ADDRESS CITY~ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 ☐ Change ☐ Addition Delete TITL F TITLE LEBIDA, ROGER NAME NAME STREET ADDRESS STREET ADDRESS 13 W LAS OLAS BLVD CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 TITLE Delete TITLE Change ☐ Addition WIEBE, CAROLINA G NAME NAME STREET ADDRESS 13 W LAS OLAS BLVD STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 CITY-ST-ZIP ☐ Delete ☐ Addition NAME WOON, TEEN NAME STREET ADDRESS 13 W LAS OLAS BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 of 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 enhancements of 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 a nt with an address other like empowéred.