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

PROFIT CORPORATION ANNUAL REPORT

RIVIERA BEACH FL 33404



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Apr 15 1997 8:00am

Secretary of State

Zip Code

1997

DOCUMENT # F94000000441 (5)

RIESBERG LUNN ARCHITECTS & ENGINEERS, P.A.

NIEODEN	G LUNIN ANUNITEUTS	a Engineers, r.a.							
Principal Place i	of Business	Mailing Address	Mailing Address				(Milist Párit Al	INTERPORT OF BUILDING STATE OF STATE	
302-B KING STR CHARLESTON S		302-B KING STREET CHARLESTON SC 29401-1441							
						Date Incorporated or Qualified 01/28/1994	1	of Last Report 4/1996	
2. Principal Pla	ce of Business	2a. Mailing Address			· · · · · · · · · · · · · · · · ·	4. FEI Number		Applied For	
21		26			57-0866443		Not Applicable		
Suite, Apt. #. etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζφ 24	Country 25	Zip 29	Coun	ountry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Reg	Istered Ag	ent	
	N, TERRENCE E N. OCEAN DRIVE #705			31	Name Street Addr	ress (P.O. Box Number is Not Acceptable	le)		

11. Pursuant to the provisions of Sections 607,0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 agent. I am lamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes.

83

City 84

SIGNATURE	Sub-Cure. Spaid or pooled can end registered agent and tale if	uore .	D. Calendaria	red when reinstaling) DATE		
12.	OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS		Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	DELETE	1.1 TITLE	Change Addition		
NAME	RIESBERG, WILLIAM		1.2 NAME			
STREET ADDRESS	302-B KING STREET		1.3 STREET ADDRESS			
CHY-SE-ZIP	CHARLESTON SC 29401		1.4 CITY-ST-ZIP	·		
THLE	S	DELETE	2.1 Title	Change Addition		
NAME	RIESBERG, SANDRA R	La DECENE	2.2 NAME			
.,	302-B KING STREET					
STREET ADDRESS			2.3 STREET ADDRESS			
CITY ST ZIF	CHARLESTON SC 29401	DELETE	2 4 CITY-ST-ZIP	Places 1 Addition		
TiTLE	V	☐ DELETE	3.1 TITLE	Change Addition		
NAME	LUNN, TERENCE E		3.2 NAME			
STREET ADDRESS	760 US HWY 1, STE. 301		3.3 STREET ADDRESS			
CHTY - \$1 - ZIP	NORTH PALM BEACH FL 33408		3 4. DITY-ST-ZIP			
TITLE		DELETE	4.1 TIYLE	Change Addition		
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHY-S1-ZIP			4.4 CITY-\$T~ZIP			
TITLE	V	DELETE	5.1 TITLE	Change Addition		
NAME:			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS	ĺ		
CHY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	Change Addition		
NAME			6.2 NAME	ļ		
STREET ADORESS			6.3 STREET ADDRESS			
CITY: S1: ZIP			6.4 CITY - ST - ZIP	d is Continue 110 07/0V/N Florids Clothers I forther continue that the		

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 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 direction of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appropring the Right 13 if the production are not received in the corporation of the corpora

SIGNATURE: