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Apr 30, 2007 8:00 am
Secretary of State
04-30-2007 90438 021 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97307

1. Entity Name
VAUGHN, WUNSCH, MASULLO ARCHITECTS, P.A.

400905ΰ6

Principal Place of Business	Mailing Address
2631 E. OAKLAND PARK BLVD. SUITE 210 FORT LAUDERDALE, FL 33306 US	2631 E. OAKLAND PARK BLVD. SUITE 210 FORT LAUDERDALE, FL 33306 US

04232007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
2631 E. OAKLAND PARK BLVD	2631 E. OAKLAND PARK BLVD
Suite, Apt. #, etc: SUITE 209	Suite, Apt. #, etc: SUITE 209
City & State: FORT LAUDERDALE, FL	City & State: FORT LAUDERDALE, FL
Zip: 33306 Country:	Zip: 33306 Country:

4. FEI Number: 59-2214333 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WUNSCH, ROBERT J. 2631 E. OAKLAND PARK BLVD., SUITE 210 FORT LAUDERDALE, FL 33306	Name: WUNSCH, ROBERT J. Street Address (P.O. Box Number is Not Acceptable): 2631 E. OAKLAND PARK BLVD SUITE 209 City: FORT LAUDERDALE FL Zip Code: 33306

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature]
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE: PTSD NAME: WUNSCH, ROBERT J. STREET ADDRESS: 2631 E. OAKLAND PARK BLVD., SUITE 210 CITY-ST-ZIP: FORT LAUDERDALE, FL 33306	☐ Delete	PTSD ☒ Change ☐ Addition WUNSCH, ROBERT J. 2631 E. OAKLAND PARK BLVD, SUITE 209 FORT LAUDERDALE, FL 33306
TITLE: VD NAME: MASULLO, JOSEPH A. STREET ADDRESS: 2631 E OAKLAND PARK BLVD STE 210 CITY-ST-ZIP: FT. LAUDERDALE, FL 33306	☒ Delete	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Robert J. Wunsch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #