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 # G09399

(8)

JOE DUBEK ARCHITECT, INC.

Principal Place of Business	Mailing Addre
1306 SE 46TH LANE	1306 SE 46TH

FILED May 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address									
1306 SE 46TH CAPE CORAL F	LANE	1306 SE 46TH LANE	*						
						3. Date incorporated or Qualified 11/23/1982	3a. Date of 05/01/1		Report
	lace of Businoss	2a. Mailing Address				4. FEI Number			pplied For
21 26 Suite, Apt. #, etc. Suite, Apt. #,		Suite, Apt. #, etc.	ole.			59-2249791			iot Applicable Additional
22 27 Suite, Apt. #, etc.				5. Certificate of Status Desired			Radinional		
City & State	е	City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip	Country	Ziρ	Cou	untry		8. This corporation has liability for in			s. 199.032
24	25	29	30	,			Yes N		
	9. Name and Address of Currer	nt Registered Agent	i	041	Nana	10. Name and Address of New Reg	istered Ager	<u></u>	
	EK, JOSEPH F		i	81	Name				
1306 SE 46TH LANE				82	Street Addr	ess (P.O. Box Number is Not Acceptabl	e)		
ÇAP	E CORAL FL 33904		i	B3					
								·	
				84	City		FL BE	Zip	Code
11. Pursuant office of r agent. I a SIGNATURE	to the provisions of Soctions 607.050 egistered again or both, in the State of familiar with and accept the oblig	02 and 607.1508, Florida St of Florida. Such change w alions of Section 607.0505	atutes, the al vas authorize o, Florida Stat	bovo d by tutes	c-named corp the corporat s.	oration submits this statement for the pr ion's board of directors. I heroby accep	irpose of cha the appointr	nging nent a	its registered s registered
	Signature, types is printed same of registered ag-			d Age	nt signature requir	ed when reinstating)	DATE		
12.		ID DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFFICE			
TITLE	PD DUBEK, JOSEPH F	DETEIE	1,170					Change	Addition
NAME OZOSSY ADDDSOS	1323 LAFAYETTE STREET		1.2 N						
STREET ADDRESS	CAPE CORAL, FL 00000				ADDRESS				
CITY-ST-ZIP TITLE	OAY E CONVE, I E 00000	DEIFTE	1.4 GI 2.1 H	ITY-S	1 - 211'			Change	Addition
NAME		E 000 10	22N		}		البيا	Onlange	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			1		ST - Zif'				
TITLE		DELETE	3.1 10		VI & 11			Change	Addition
NAME			3.2 N		Ì			-	
STREET ADDRESS			l i		ADDRESS				
CITY-ST-ZIP					S1-2IP				
TITLE		DELETE	4.1 [1					Change	Addition
NAME			4.2 N	NAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-ZIP				11 Y - S	T-ZIP				
TITLE		DELETE	5.1 11	ITLE				Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS			535	TREET	ADDRESS				
CITY-ST-ZIP			540	ny-s	31 - ZIP				
TITLE		☐ DELETE	61 11	ITLE				Change	Addition
NAME			62 N	AME					
STREET ADDRESS			6351	TREET	ADDRESS				
CITY-ST-ZIP			640	11Y-S	1 - 7(P				
	by certify that the information supplice	ed with this filing does not a				d in Section 119.07(3)(i), Florida Statutes	. I further cer	tify the	it 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 director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Ulislan 941- 019-24AD