2004 FOR PROFIT CORPÖRATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Feb 02, 2004 08:00 AM
Secretary of State

\Box	OCL	JMENT	¯ # G	118	21
	C 100 111				

1. Entity Name

RICHARD LEVINE & ASSOCIATES, ARCHITECTS & DESIGNERS, P.A.



Principal Place of Business

Mailing Address

3814 N.E. MIAMI COURT MIAMI, FL 33137

SIGNATURE: 3

3814 N.E. MIAMI COURT MIAMI, FL 33137



01262004

No Chg-P

CR2E034 (10/03)

4.	FEI Number
	59-2255831

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CUMMINGS, PAUL M ESQ. 1428 BRICKELL AVENUE, STE. 400 MIAMI, FL 33131

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8. The above the obligat	named entity submits this statement for the prions of registered agent.	surpose of changing its registered o	ffice or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agont and title				
	Signature, typed or printed name of registered agont and title	applicable (NOTE Registered Age	nt signature	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			0000000031207 02/04/04-80138-020 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD LEVINE, RICHARD 3814 N.E. MIAMI CT. MIAMI, FL 33137				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CALDERIN, JOSE 3814 N.E. MIAMI CT. MIAMI, FL 33137		_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corchanged	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ling does not qualify for the exempt and accurate and that my signature to be execute this report as required other like empowered.	on state shall ha by Chap	d in Section 119.07(3)(ve the same legal effecter 607, Florida Statute	(i), Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director as; and that my name appears in Block 10 or Block 11 if