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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H57107**

1. Corporation Name

THE ARCHITECTURAL PARTNERSHIP, INC.

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Principal Place	e of Rusiness	Mailing Address				[188 Q [] 8 8] 8 1] 1 889 1		Y DIRY DUUL		8111) DIRN 1811
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C/O Jorge R. Cibran 5040 NW 7TH St. Suite 690			C/O JORGE R. CIBRAN 5040 NW 7TH ST. SUITE 690		ļ				•	
MIAMI FL 33126		MIAMI FL 33126				DO NOT	WRITE II	N THIS SE	ACE	
					3. D	ate Incorporated or Qua	lifed			
						<u>5/15/1985 </u>				
2. Principal P	lace of Business	2a. Mailing Address			"	El Number				pplied For
21		26			5	9-2682597				ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. C	ertifcate of Status Desire	ed 🖢		•	Additional
22		27						 -		equired
City & State		<u>├</u> ──	City & State			lection Campaign Finance	cing \Box]		May Be
Zip	Country	28 Zip	Country			rust Fund Contribution				to Fees
	25	-	30	,	l l	his corporation owes the ersonal Property Tax.	current y		gible] Yes	□No
24	9. Name and Address of Curr	29 29 Agent	1301			lame and Address of N	ew Regis			
	3. Italie and Addition of Carl	Cit Registered Agent	81	Name		dillo dilla ridarioso or ri	out reage	<u> </u>		
CIBR	RAN, JORGE R.		_	<u> </u>			<u> </u>	· ·		
5040	NW 7TH ST., SUITE 690		82	Street	Address (P.O), Box Number is Not Ac	ceptable)			
MAIM	WI FL 33126		83	<u> </u>						
				L			_ -			
			84	City				Fi	85 Zip	Code
			l l							
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Statut	tes, the abov	e-named	l corporation s	ubmits this statement for	r the purc	ose of ch	anging its	registered
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	te of Florida. Such change was a	authorized by	the corpo	l corporation s oration's boar	ubmits this statement for d of directors. I hereby a	r the purp accept the	ose of characters	anging its ent as re	registered egistered
office or re agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was a	authorized by	the corpo	l corporation s ocration's boar	ubmits this statement for d of directors. I hereby a	r the purp accept the	oose of cha appointm	anging its nent as re	s registered egistered
office or re agent. I a SIGNATURE	egistered agent, or both, in the Star	te of Florida. Such change was a gations of, Section 607.0505, Flo	authorized by orida Statutes	the corpo	I corporation s oration's boar required when reins	d of directors. I hereby a	accept the	oose of chi appointm	anging its nent as re	s registered egistered
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14. 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 annual report or suppliemental annual report is flue 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 12 or Block 13 if orlanged, or on an attachment with an address, with all other like empowered.

SIGNATURE: