2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

FILED Apr 17, 2003 8:00 am Secretary of State 04-17-2003 90172 036 ***150.00

H69572 **DOCUMENT #**

1. Entity Name

SDS ARCHITECTS, INC.

Principal Place of Business

529 S. GREENWOOD AVE. CLEARWATER FL 33756 MOUSD			CLEARWATER FL 33756 S, MARTIN LUTHER L				NED	4 VE .				
2. Principal P				ng Address S. M&ZTI	NLOT	Her Kine	adr.		ilei eieli eiel	41011016110		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State CLEARWH TOTZ, FC		City & State CCEARWATER		2 Fo	FL		4. FEI Number 59-2560631			pplied For ot Applicable		
Zip 3375	Country SA		33156			Country USA		5. Certificate of Status Desired \$8.75 Addition Fee Required				
-	6. Name	and Address of Current	Registered	d Agent			7. Na	ime and Address of New Re	gistered A	gent]
SWANBER -529 S GRE	in cuther 2. Ave		Name Street Address (P.O. Box Number is Not Acceptable)						 			
OLEARWA	IER I E 337	CUEAR	CUATE	NHTER FL 33750		City			FL	Zip Cod	le	}
the obligation of the obligati	STEF Signature, typed ILE NOW!! May 1, 200	PLEN D. Sucorprinted name of registered agent ! FEE IS, \$150.00 13 Fee will be \$550.00	JANE and title if appli	ens	\leq	office or registe	Dy	nt, or both, in the State of Flori stating) 9. Election Campaign Fina Trust Fund Contribution.	1 Apr	\$5.0		_
	Payable to	Florida Department o]
10.	5°	OFFICERS AND	DIRECTOR		11.		ADD	ITIONS/CHANGES TO OFFIC				ี่ ฉ
NAME STREET ADDRESS	529 C GRE	g, stephen david Enwood avenue Ter Fl 33756	1106 APT	Delete S.M ISSO IOS	TITLE NAME CITY-ST	4				∐ Change	☐ Addition	CR2E034 (10/02)
NAME STREET ADDRESS	529 & GRE	G, MARLA S. ENWOOD-AVENUE- \$ IER FL 33-7569	106 S	Delete	TITLE NAME CITY-ST					☐ Change	Addition	CR2
TITLE NAME "STREET ADDRESS" CITY-ST-ZIP				□ Delete	TITLE NAME STREET A					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET /	ADDRESS				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	**************************************			☐ Delete	TITLE NAME STREET A					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP				☐ De!ete	TITLE NAME STREET A	4		, ,		Change	Addition	

12. 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 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 expowered 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 addition, with all other like empowered.