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PROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 23 1997 8:00am

1.15.97 (813) 8767040

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H77702

(9)

WOODROFFE CORPORATION, ARCHITECTS

Principal Place of Business 3333 HENDERSON BLVD. STE 200 TAMPA FL 33609 US 2. Principal Place of Business 21		Mailing Address 3333 HENDERSIB BLVD. STE 200 TAMPA FL 33609 US 2a. Mailing Address 26		3. Date Incorporated or Qu 09/25/1985 4. FEI Number 59-2572241	4. FEI Number Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Des	ired \$8.75 Additional Fee Required	
City & Stat 23	e	City & State		6. Election Campaign Final Trust Fund Contribution	ncing \$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	Florida Statutes	ility for intangible tax under s. 199.032,	
	9. Name and Address of Currer	nt Registered Agent	81 Nam	10. Name and Address of	New Registered Agent	
	DDROFFE, ENRIQUE HENDERSON BLVD. STE 200		81 Nam	10		
TAMPA FL 33809			82 Stre	et Address (P.O. Box Number is Not A	cceptable)	
			83			
			84 City		FL 85 Zip Code	
office or r	registered agent or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was ations of, Section 607.0506, I	s authorized by the c	ed corporation submits this statement orporation's board of directors. I hereb	for the purpose of changing its registered by accept the appointment as registered	
	Signature, typed or printed name of registered ag-			ure required when reinstating)	OATE	
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS IN 12	
NAMÉ	WOODROFFE, ENRIQUE	beten	1.1 TITLE 1.2 NAME		Change L Addition	
STREET ADDRESS	1200 W PLATT ST #201		1.3 STREET ADDRES	5 3333 Hall	0.1	
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST- ZIP	S 3333 Henderson	Bugistesso	
TITLE		DELETE	2.1 TITLE	Turks-,10	Change Addition	
NAME			2.2 NAME		,	
STREET ADDRESS			2.3 STREET ADDRES	s		
City+St-ZiP			2. 4 CITY - ST- ZIP			
TITLE	The state of the s	DELETE	3.1 TITLE		Change Addition	
NAM(3.2 NAME		· ·	
STREET ADDRESS			3.3 STREET ADDRES	S	·	
CITY - ST - ZIP		Document	3.4. CITY-\$T-ZIP			
TITLE		∐ DELET€	4.1 TITLE		Change Addition	
NAME STREET ADDRESS			4. 2 NAME	_		
CHY-ST ZIP			4.3 STREET ADDRES	3		
TITLE	,	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition	
NAME			5.2 NAME		onorigo radition	
STREET ADDRESS			5 3 STREET ADDRES	s		
C:1Y - ST- ZIP			5.4 CITY-ST-ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME		•	
CIDEET ARRIGICO			e a crocct appore	r		

64 CITY-ST-ZIP 14. Ido 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 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 Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address