FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Suite, Apt. #, etc.

City & State

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K42869

(3)

Suite, Apt. #, etc.

City & State

HIRSCH ARCHITECTS, INC.

HIRSCH, KENNETH JAY

Principal Place of Business	Mailing Address			
7078 SAN SALVADOR BOCA RATON FL 33433	7078 SAN SALVADOR BOCA RATON FL 33433-1007			

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9. Name and Address of Current Registered Agent

FILED Apr 09 1997 8:00am Secretary of State



1 √2 √2 □ No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

0317965

Not Applicable

03/07/1996

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

10/27/1988

4, FEI Number 65-0119539

7078 SAN SAVADOR BOCA RATON FL 33433				82 Street Address (P.O. Box Number is Not Acceptable) 83					
			84	City	FL	85	Zip C	ode	
11. Pursuan	nt to the provisions of Sections 607.0502 and 607.15	08, Florida Statutes	the above	e-named	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	chang	aing its	registered	
office or agent. I	r registered agent, or both, in the State of Florida. So am familiar with, and accept the obligations of, Sec	uch change was aut	thorized by	the corp	poration's board of directors. I hereby accept the app	ointme	nt as r	registered	
SIGNATURE	, ,								
SIGNATORE	Signature, typed or printed name of registered agent and little if appli	icable (NOTE I	Registered Age	ent signature	required when reinstaling) DATE				
12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND				
TITLE	PTD	DELETE	1.1 TITLE	-		L Ch	ange	Addition	
NAME	HIRSCH, KENNETH JAY		1.2 NAME	ļ					
STREET ADDRESS			1.3 STREET	ADDRESS					
CITY - ST - ZIP	BOCA RATON FL		1.4 CITY - S	T- ZIP					
TITLE	VSD	DELETE	2.1 TITLE			Ch Ch	ange	Addition	
NAME	HIRSCH, SHIRLEY		2.2 NAME	ļ					
STREET ADDRESS			23 STREET	ADDRESS					
CHY-ST ZiP	BOCA RATON FL		2.4 CITY-1	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE			Ch	ange	Addition	
NAME	{		32 NAME						
STREET ADDRESS	s		3.3 STREET	ADDRESS					
C11Y-S1-7IP	ì		3.4. CITY-5	ST-ZIP					
TITLE		DELETE	4.1 TITLE			Ch	ange	Additio	
NAME			4.2 NAME	i	·				
STREET ADDRESS	₅ {		4.3 STREET	ADDRESS					
CITY - ST - ZIP	•		4.4 City-S	T-ZIP					
IIILE		DELETE	5.1 TITLE			Ch	ange	Additio	
NAME			5.2 NAME						
STREET ADDRESS	s (5.3 STREET	ADDRESS					
City - St - ZIP			5.4 CITY-S						
TOLE		DELETE	6.1 TITLE			Ch	ange	Addition	
NAME	{		6.2 NAME	į	,	_	-		
STREET ADDRÉSS	s		6.3 STREET	ADDRESS					
CHY-SI-ZIP	- {		6.4 CITY-5						
14 I do her	reby certify that the information supplied with this fili	ing does not qualify	for the exe	motion s	tated in Section 119.07(3)(i), Florida Statutes. I furthe	r certify	/ that f	lhe	
informat Lam an	tion indicated on this annual report or supplemental	annual report is tru or trustee empower	e and accured to the contract of the contract	irate and	tated in Section 119.07(3)(i), Florida Statutes. I furthe I that my signature shall have the same legal effect a eport as required by Chapter 607, Florida Statutes, a	e if	mar	made und	

Country

81 Name

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