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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Piace of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K73524

(6)

CTG ARCHITECTS, INC.

Mailing Address

FILED Feb 18 1997 8:00am Secretary of State



229 N.E. 28 TE Miami Fl 3313			229 N.E. 26 TEHR. Miami Fl 33137-4519					
						3. Date Incorporated or Qualified 03/17/1989	3a. Date of Last F 01/17/1996	Report
2. Principa! P	lace of Business	2a. Mailing A	2a. Mailing Address			4, FEI Number	A	pplied For
21		26	26			65-0111494	/ N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt	#, etc.	i				Additional
22		27	27			5. Certificate of Status Desired	Fee R	equired
City & State	e	City & Sta	ite		1 1	6. Election Campaign Financing	\$5.00	May Be
23		28	28			Trust Fund Contribution		
Ζφ	Country Zip			Country		8. This corporation has liability for	ntangible tax under s	s. 199.032,
24	25	29	30	5			Yes No	
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
GAR	RCIA, CARMEN T.			81	Name			,
	S.W. 18TH TERRACE		62 Street Addr			dress (P.O. Box Number is Not Acceptable)		
	MI FL FL 33165		5treet Addr			Jiess (r. C. Dox raumosi is rau mocephanie)		
				83				
							·····	
				84	City		FL 85 Zip	Code
office or r	to the provisions of Sections egistered agent, or both, in im familiar with, and accept	the State of Florida. Such of	hange was auti	horized b	y the corpo	orporation submits this statement for the p oration's board of directors. I hereby accep	urpose of changing i	its registered registered
SIGNATURE								
	Signature typeo or printed name of re	·	(NOTE: F		ent signature re	quired when reinstating)	DATE	
12.		CERS AND DIRECTORS	l ne ere	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC		
TITLE	PVS	L	DELETE	1.1 TITLE	ļ		Change	☐ Addition
NAME	GARCIA, CARMEN T.			1.2 NAME	į			
STREET ADDRESS	8940 S.W. 18TH TERR			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33165		.	1.4 CITY-	ST-ZIP			
TITLE	TD		DELETE	2.1 TITLE			Change	L_ Addition
NAME	GARCIA, CARMENT, T			2.2 NAME				
STREET ADDRESS	8940 SW 18TH TERR			23 STREE	T ADDRESS			ļ
CITY-ST-ZIP	MIAMI FL 33165			2.4 DITY-	ST-ZIP			
TITLE			DELETE	3.† TITL€			☐ Change	Addition
NAME				3.2 NAME	1			
STREET ADDRESS				3.3 STREE	T ADDRESS			
CITY-ST-ZIP				3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME	Ì			4, 2 NAME				
STREET ADDRESS				4.3 STREE	T ADDRESS			
CITY-ST-ZIP				4,4 CITY-	ST-ZIP			
TITLE			DELETE	5.1 TITLE		, , , , , , , , , , , , , , , , , , ,	Change	Addition
NAME				5.2 NAME			_]
STREET ADDRESS					T ADDRESS			
CrTY - ST - ZIP				5.4 CITY-	ŀ			
TITLE			DELETE	6.1 TITLE	J. 211		Change	Addition
NAME		_		6.2 NAME			tion with the	
1				1	1			
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				6.4 CITY-	SI-ZIP			

14. I do 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.