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Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L10947 (4)

1. Corporation Name
ARCHITECTURAL SALES & MARKETING, INC.



Principal Place of Business

8140 SW 62 CT
MIAMI FL 33143

Mailing Address

8140 SW 62 CT
MIAMI FL 33143-8004

3. Date Incorporated or Qualified
08/23/1989

3a. Date of Last Report
05/09/1996

2. Principal Place of Business

21 16442 S.W. 94 St

2a. Mailing Address

26 16442 S.W. 94 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State
Miami, Fla.

28 City & State
Miami, Fla.

24 Zip
33196

Country
Dade

29 Zip
33196

Country
Dade

4. FEI Number

65-0247997

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FONT, PATRICIO
8140 SW 62 CT
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name Alejandro Urquiza PD

82 Street Address (P.O. Box Number is Not Acceptable)
16442 S.W. 94 St.

83

84 City Miami

FL

85 Zip Code
33196

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Alejandro Urquiza

Alejandro Urquiza

3/4/97

Signature of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME URQUIA, ALEJANDRO
STREET ADDRESS 11331 SW 71 LN
CITY - ST - ZIP MIAMI FL

TITLE VSD ☐ DELETE

NAME FONT, PATRICIO
STREET ADDRESS 8140 SW 62 CT
CITY - ST - ZIP MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Alejandro Urquiza
1.3 STREET ADDRESS 16442 S.W. 94 St
1.4 CITY - ST - ZIP Miami, Fla, 33196

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 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.

SIGNATURE:

Alejandro Urquiza

3/4/97 (306) 386-7910

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (9/96)