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Mar 31 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 # **M41727** (2)

1. Corporation Name
ARCHIE REALTY, INC.

Principal Place of Business

**ARCHIE REALTY, INC.
2801 S.W. 31 AVE. A
MIAMI FL 33133
US**

Mailing Address

**2801 S.W. 31 AVE. A
MIAMI FL 33133-3511
US**



2. Principal Place of Business

21 **2981 N.W. 79 Ave**
State, Apt. #, etc

22 **MIAMI FL**
City & State

23 **33122**
Zip

24 Country

25

2a. Mailing Address

26 **2981 NW 79 Av.**
State, Apt. #, etc

27 **MIAMI FL**
City & State

28 **33122**
Zip

29 Country

30

3. Date Incorporated or Qualified
11/17/1986

3a. Date of Last Report
04/16/1996

4. FEI Number

59-2751165

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

**MEHECH, ARCHIE
2801 SW 31 AVENUE 'A'
MIAMI FL 33143**

10. Name and Address of New Registered Agent

81 Name **MEHECH, ARCHIE**
82 Street Address (P.O. Box Number is Not Acceptable)
2981 NW 79 Av
83 **MIAMI FL**
84 City

FL 85 Zip Code
33122

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **MEHECH, ARCHIBALD**
STREET ADDRESS **2801 S.W. 31 AVE. A**
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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **A. MEHECH, ARCHIE**
1.3 STREET ADDRESS **2981 NW 79 Av**
1.4 CITY - ST - ZIP **MIAMI FL 33122**

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, 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 included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

U.S. Time Zone

CR2E034 (9/96)