

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jul 31, 2001 08:00 AM****Secretary of State****DOCUMENT # P00000049795**1. Entity Name  
ARCHITECTURAL TECHNOLOGIES CORP.Principal Place of Business  
905 W PARKWAY DR  
STUART FL 34996  
Mailing Address  
905 W PARKWAY DR  
STUART FL 349962. Principal Place of Business  
905 E PARKWAY DR  
Suite, Apt. #, etc.3. Mailing Address  
905 E PARKWAY DR  
Suite, Apt. #, etc.City & State  
STUART FLZip  
34996

6. Name and Address of Current Registered Agent

KOMARA DONALD KEITH  
905 W PARKWAY DR  
STUART FL 349964. FEI Number  
Applied For  
☒ Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name  
KOMARA DONALD KEITH  
Street Address (P.O. Box Number is Not Acceptable)  
905 E PARKWAY DR  
City  
STUART FL Zip Code  
34996

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ 07/31/2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PCD  
KOMARA DONALD KEITH  
905 W PARKWAY DR  
STUART FL 34996 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
KOMARA DONALD KEITH  
905 W PARKWAY DR  
STUART FL 34996 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PCD  
KOMARA DONALD KEITH  
905 E PARKWAY DR  
STUART FL 34996 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
KOMARA DONALD KEITH  
905 E PARKWAY DR  
STUART FL 34996 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

13. 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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald Keith Komara CEO 07/31/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)