

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90045 039 ***150.00

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DOCUMENT # P01000010946

1. Entity Name

ARCHITECTURAL & MARKETING SERVICES, INC.

Principal Place of Business

**410 EAST HALLANDALE BEACH BOULEVARD
 SUITE 203
 HALLANDALE FL 33009**

Mailing Address

**410 EAST HALLANDALE BEACH BOULEVARD
 SUITE 203
 HALLANDALE FL 33009**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1830 S. Treasure Dr

3. Mailing Address

1830 S. Treasure Dr

Suite, Apt. #, etc.

Apt 8

Suite, Apt. #, etc.

Apt 8

City & State

North Bay Village, FL

City & State

North Bay Village, Florida

4. FEI Number

65-1073341

Applied For

Not Applicable

Zip

33141-4341

Country

U.S.A

Zip

33141-4341

Country

U.S.A

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PINZON, MARTHA L

2626 NE 11 COURT #3

FORT LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. 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, 2002 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 **PST** ☐ Delete
 NAME **PINZON, MARTHA L**
 STREET ADDRESS **2626 NE 11 COURT #3**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33304**

TITLE **VPD** ☐ Delete
 NAME **PINZON, MARTHA L**
 STREET ADDRESS **2626 NE 11 COURT #3**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33304**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 fee empowered.

SIGNATURE:

Martina L. Pinzon
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/02

Date

(305) 336-6746

Daytime Phone #

CR2E034 (9/01)