2004 FOR PROFIT CORPORATION

changed, or on an attachment with an address,

SIGNATURE AND TYPED OR I

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INTED NAME OF SIGNING OFFICER OR DIRECTOR

03/31/2004

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Apr 02, 2004 8:00 am Secretary of State **ANNUAL REPORT (AR)** DOCUMENT # P02000104775 04-02-2004 90057 022 ***158.75 ABC. ARCHITECTURAL BUSINESS COMPANY Principal Place of Business Mailing Address 111 SW 5TH AVENUE 111 SW 5TH AVENUE 94042529 205 MIAMI FL 33130 **MIAMI FL 33130** 2. Principal Place of Business 3. Mailing Address !!!S.W 5th AVENUE st <u> 111 S.W 5TH AVENUE ST 2</u>01 Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) suite 201 city & State 201 4. FEI Number Applied For 04-3702165 Miami FLORIDA Miami Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired DADE Fee Required 33130-1381 33130-1381 DADE 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ANA B CASTANO CASTANIO, ANA B Street Address (P.O. Box Number is Not Acceptable) 111 SW 5TH AVE. MIAMI FL 33130 SUITE 201 City Zip Code <u>3313n</u> MIAMI 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. I am familiar with, and accept. the obligations of registered agent march 31/2004 SIGNATURE of registered agent and title if applicable. FILE NOW!!! FÈĘ IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10/ OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEO TITLE ☑ Delete TITLE Change Addition CEO CASTANO, ANA B NAME CASTANO, ANA B. 111 S.W 5th AVE. SUITE 201 NAME STREET ADDRESS 655 WEST FLAGLER ST., STE 206 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33130** CITY-ST-ZIP Miami FL 33130-1381 VΡ ☐ Delete TITLE TITLE Change ☐ Addition NAME ORUNA, FELIPE NAME 111 SW 5TH AVE., #205 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33130 CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME RESTREPO, BEATRIZ NAME Restrepo, Beatriz 111 S.W 5th AVE. SUITE 201 STREET ADDRESS 655 WEST FLAGLER ST., STE 206 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33130 Miami FL 33130 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change | Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 10 or Block 11 if

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