## **2003 FOR PROFIT CORPORATION**

SIGNATURE:

UN	IFORM BUSINE	SS REPORT	(UBR	)	171ay 05, 2005 0.00 am	
DOCUMENT # P02000104775  1. Entity Name					Secretary of State 05-05-2003 91893 017 ***163.75	
ABC. AR	CHITECTURAL BUSINESS C	COMPANY				
Principal Place of Business 655 WEST FLAGLER ST. SUITE 6		Mailing Address 655 WEST FLAGLER ST. SUITE 6				
MIAMI FL 33130		MIAMI FL 33130				
2. Principal Place of Business Miami, FL III SW 5th Ave		3. Mailing Address  J11 SW 5H Ave .  Suite, Apt. #, etc.			)	
Suite, Apt. #, etc. 205.		205			☐ CHECK HERE IF MAKING CHANGES	
City & Stat	Momi, H.	City & State  Miami, FL			4. FEI Number 04370 2165 Applied For Not Applicable	
Zip 32	130 Country 1).61.A.	33130	Country U.12. A	. [	5. Certificate of Status Desired   \$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent	
Name Name				Ara	B. Costaño.	
Castanio, ana B 655 West Flagler St.				Street Address (P.O. Box Number is Not Acceptable)		
SUITE 6		111 GV		6.V	v oth Ave.	
MIAMI FL 33130			City }	Hiami FL Zip Code 3130		
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.						
SIGNATURE Signature, which can be sent and bille if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
FILE NOW!\t FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees						
10.	OFFICERS AND D	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS	D CASTANO, ANA B 655 WEST FLAGLER ST.	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
CITY-ST-ZIP	MIAMI FL 33130	Delete	CITY-ST-ZIP	V.P.	. Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP	Oruña Felipe 111 SW Sth Ave # Miami Fl 3313	205.	NAME STREET ADDRESS CITY-ST-ZIP	070F	To Felipe Sw. 5th Aue + 205 mi FL 33130.	
TITLE	ENGLE - PC, JOH	□ Delete	TITLE	MICH	Change Addition	
NAME			NAME		_ , _	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP		·	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
title Name	* * *	☐ Delete	TITLE NAME		☐ Change ☐ Addition	
STREET ADDRESS	·· <b>、</b>		STREET ADDRESS			
CITY-ST-ZIP	5°5	ibila filita ala antico del filita	CITY-ST-ZIP		Mar 440 07(0V) Flacida Chance II abarras (Chance II)	
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 changed, or on an attachment with an address, with all other like empowered.						