FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

FILED

Feb 04 1998 8:00am

Secretary of State

ARCHITECTURAL MEDIA LTD. INC.					: A:A:3 A(A:4 A(A:4 A)A:4 A:4((A:A); A:4()	
Principal Place	e of Business	Mailing Address			- I SANDINAN HAN ESALS CORRUC NISTRA RECEIPTION	A MATIN MINNI MINNA MADIN MANIA DANIA INNI
4500 HIGH GROVE RD. 4500 HIGHGROVE RD.						
TALLAHASSE FL 32308 TALLAHASSEE FL			06		DO NOT WRITE I	INITUIO COACE
US		US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					02/20/1992	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		86-0308949	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$9.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country Zip Coul		Country		8. This corporation owes or has paid	1
24	25		10		Personal Property Tax due June 3	
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Reg	Istered Agent
WHITE, EDWARD T.				name		
4500 HIGH GROVE RD.			82	Street Addr	ress (P.O. Box Number is Not Acceptable	e)
TA	LLAHASSEE FL 32308		83			
			84	City		FL 85 Zip Code
11 Purcuent I	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the above	-named corr	poration submits this statement for the pu	
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized by	the corporat	poration submits this statement for the pution's board of directors. I hereby accept	the appointment as registered
	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	oa Statutes			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE:	Registered Ager	ıt signature requir	red when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE			Change Addition
NAME	WHITE, EDWARD T.		1.2 NAME			
STREET ADDRESS			1.3 STREET A	ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL			- 2IP		
TITLE	8	☐ DELETE	2.1 TITLE			Change Addition
NAME	WHITE, EDWARD T.		2.2 NAME	į		
STREET ADDRESS	4500 HIGH GROVE RD.		2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - S	T-ZIP		
TITLE	I White Edward T	☐ DELÉTE	3.1 TITLE			Change Addition
NAME	WHITE, EDWARD T.		3.2 NAME			
STREET ADDRESS	4500 HIGH GROVE RD. TALLAHASSEE FL		3.3 STREET			
CITY-ST-ZIP TITLE	TALLAHASSEE FL	DELETE	3.4. CITY-S' 4.1 TITLE	1 - 214		Change Addition
		Detter	4. 2 NAME		•	
NAME OTREET ADDRESS			4.2 NAVIE 4.3 STREET ADDRESS			
STREET ADDRESS			4.4 CITY - ST - ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	9.4 CITY - 51 - ZIP 5.1 TITLE			Change Addition
NAME		—	5.2 NAME			_ , _
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST			
TITLE		☐ DELET E	6.1 TITLE			☐ Change ☐ Addition
NAME	1		6.2 NAME			
STREET ADDRESS		1	6.3 STREET	ADDRESS		
CITY OT 74D		<i>'</i>	FACITY ST	ŀ		

14. I hereby certify that the information surplies with his 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 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 taskee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, of an anatomy of the corporation of the corporation