

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 24 AM 8:27

DOCUMENT # P94000005770 (0)

1. Corporation Name

ARCOP ARCHITECTS (FLORIDA), INC.

Principal Place of Business

Mailing Address

3250 MARY ST.
SUITE 102
MIAMI FL 33133

3250 MARY ST.
SUITE 102
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1994

3a. Date of Last Report

4. FEI Number

65-0473674

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes



Yes No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEDZOW, MICHAEL
20803 BISCAYNE BLVD.
SUITE 200
AVENTURA FL 33180

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of current registered agent and their representative)

(Signature of new registered agent required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	HUGHS, W. PAUL
STREET ADDRESS	3250 MARY ST., SUITE 102
CITY, ST, ZIP	MIAMI FL 33133
TITLE	DV
NAME	NICHOL, ARTHUR B
STREET ADDRESS	3250 MARY ST., SUITE 102
CITY, ST, ZIP	MIAMI FL 33133
TITLE	DV
NAME	SCHINDLER, JACEK W
STREET ADDRESS	3250 MARY ST., SUITE 102
CITY, ST, ZIP	MIAMI FL 33133
TITLE	DST
NAME	DA SILVA, JULIE
STREET ADDRESS	3250 MARY ST., SUITE 102
CITY, ST, ZIP	MIAMI FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	Change Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	Change Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	Change Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	Change Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	Change Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, do, hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

(Signature and name of officer or director)

JACEK SCHINDLER, V.P.

7/19/95

305-4426700