

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90031 018 ***150.00

DOCUMENT # P94000066913

1. Entity Name
 MJA ARCHITECTURAL SERVICES, INC.

Principal Place of Business: 11382 Prosperity Farms Rd. Suite 130 Palm Beach Gardens FL 33410
 Mailing Address: 11382 Prosperity Farms Rd. Suite 130 Palm Beach Gardens FL 33410

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State

4. FEI Number: 65-0535015
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Cox, Jack S.
 4400 PGA Blvd.
 Suite 201
 Palm Beach Gardens FL 33410

7. Name and Address of New Registered Agent
 Name: Donald R. Bicknell
 Street Address (P.O. Box Number is Not Acceptable): 701 U.S. Highway One Suite 402
 City: North Palm Beach FL Zip Code: 33408

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:  Donald R. Bicknell 3/27/01
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, 2001 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	P	<input type="checkbox"/> Delete
NAME	Anderson, Michael J.	
STREET ADDRESS	11382 Prosperity Farms Rd.	
CITY-ST-ZIP	Palm Beach Gardens FL 33410	
TITLE	T/S	<input checked="" type="checkbox"/> Delete
NAME	Tamila, David W.	
STREET ADDRESS	11962 SE Tiffany Way	
CITY-ST-ZIP	Tequesta FL 33469	
TITLE	V	<input type="checkbox"/> Delete
NAME	Leland, Edwin	
STREET ADDRESS	4835 Bimini Rd.	
CITY-ST-ZIP	Tequesta FL 33469	
TITLE	V	<input type="checkbox"/> Delete
NAME	William Tracy	
STREET ADDRESS	11382 Prosperity Farms Rd.	
CITY-ST-ZIP	Palm Beach Gardens FL 33410	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cindy Cswerko	
STREET ADDRESS	11382 Prosperity Farms Rd.	
CITY-ST-ZIP	Palm Beach Gardens FL 33410	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 like empowered.

SIGNATURE:  Michael J. Anderson 3/19/01 561-627-4744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)