

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

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000069050 (0)

1. Corporation Name  
ARCHWAY CAPITAL INC.



Principal Place of Business

2001 A AUSTRALIAN AVE  
RIVIERA BCH FL 33404  
US

Mailing Address

2001 A AUSTRALIAN AVE  
RIVIERA BCH FL 33404  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 4900 Dyer Blvd  
Suite, Apt. #, etc.

2a. Mailing Address

26 4900 Dyer Blvd  
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

09/20/1994

4. FEI Number

65-0522370

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

City & State

23 Riviera Bch FL

Zip

24 33407

Country

City & State

28 Riviera Bch FL

Zip

29 33407

Country

9. Name and Address of Current Registered Agent

HERTER, JOHN D  
12314 61ST ST N  
WEST PALM BEACH FL 33412

10. Name and Address of New Registered Agent

81 Name Patrick Sullivan  
82 Street Address (P.O. Box Number is Not Acceptable) 4900 Dyer Blvd  
83  
84 City Riviera Bch FL 85 Zip Code 33407

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME HERTER, JOHN D  
STREET ADDRESS 12314 61ST ST N  
CITY-ST-ZIP WEST PALM BEACH FL 33412 ☒ DELETE

TITLE D  
NAME HERTER, GAREY  
STREET ADDRESS 3123 FLORIDA MANGO RD.  
CITY-ST-ZIP LAKE WORTH FL 33461 ☐ DELETE

TITLE D  
NAME SULLIVAN, PATRICK  
STREET ADDRESS 607 WESTWINDS DR.  
CITY-ST-ZIP N. PALM BCH. FL 33408 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 4900 Dyer Blvd  
2.4 CITY-ST-ZIP Riviera Bch FL 33408 ☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 4900 Dyer Blvd  
3.4 CITY-ST-ZIP Riviera Bch FL 33408 ☒ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE Patrick Sullivan Director 4/21/98 561-841-166

CR2E034 (10/97)