## 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 # P95000041526 (1)

1. Corporation		ARCH, INC.	JOO-11	020 (1)									
Principal Place of Business Mailing Address													
1300 NORTH FEDERAL HIGHWAY 1300 NORTH FEDERAL HIGHWAY STE 103													
BOCA RATON FL 33432 BOCA RATON FL 33432									DO NOT WRITE IN THIS SPACE				
į.									3. Date Incorporated or Qualified				
2. Principal Place of Business 2a. Mailing Address									05/26/1995 4. FEI Number		1 1	Applied For	
21	1000 01 000	11000		26					65-0590931			Not Applicable	
Suite, Apt	. #, etc.			Suite, Apt. #, etc.								5 Additional	
22			27	27					5. Certificate of Status Desired			Required	
City & Sta	te		Ci	City & State					6. Election Campaign Financing \$5.00 May Be				
23			28					Trust Fund Contribution		Adde	d to Fees		
Zip	Country		— ·	Zip		Country			8. This corporation owes or has p		´		
24 25 9. Name and Address of Curren				29 30 30			· · <del>-</del> · - · · · · ·		Personal Property Tax due Jun 10. Name and Address of New R		X Yes	∐ No	
DA			Total Hogiston	A Agont	8	n	Name		IQ, realing allo Address of New II	ogistoroc	Agoin		
BARTOLOMEO, JAMES A 1300 NORTH FEDERAL HIGHWAY						ᆚ							
STE 103						12	Street Ad	ldress	(P.O. Box Number is Not Accepta	ple)			
BOCA RATON FL 33432						3			· · · · · · · · · · · · · · · · · · ·				
20011411011112 00102						4	City			<del></del>	lee 7	n Cada	
										Fl	_   -	p Code	
11. Pursuant	to the provis	sions of Sections 607.0	0502 and 607.1	1508, Florida Statut	tes, the abo	ve-	named co	rpora	ation submits this statement for the s board of directors. I hereby acce	purpose of	of changing	its registered	
agent. I a	am familiar w	ith, and accept the ob	ligations of, Se	ection 607.0505, FI	orida Statut	es.		allon	s board of directors, i horoby acce	pt the ap	pominent	as registered	
SIGNATURE							·						
Signature, typed or printed name of registered agent and title if applicable. (NOTE:  12, OFFICERS AND DIRECTORS						Registered Agent signature required			hen reinstating) ADDITIONS/CHANGES TO OFFI	DATE OFRS AN	D DIRECT	OBS IN 12	
TITLE	1 5	OHIOLIO	THE DITLETO	DELETE		1.1 TITLE			ADDITIONS/OFFANIALS TO OFF	OLIIO AIV	Change		
NAME	MERSAND, STEVE N					1.2 NAME					_ *	<del>-</del>	
STREET ADDRESS		ORTH FEDERAL HIG	HWAY STE	VAY STE 103		1.3 STREET ADDRESS							
CITY-ST-ZIP	BOCA F	RATON FL 33432				1.4 CITY - ST - Z							
TITLE	D			☐ DELETE			LE				☐ Change	e 🔲 Addition	
NAME		OMEO, JAMES A		2.2 NAME	AME								
STREET ADDRESS	1300 NO	103	2.3 STRE	ADDRESS									
CITY-ST-ZIP	BOCA F	RATON FL 33432		DELETE	2. 4 CITY		-ZIP			<del></del>			
TITLE					3.1 TITLE						L Change	B Addition	
NAME					3.2 NAME								
STREET ADDRESS					3.3 STREE								
CITY-ST-ZIP TITLE	<del>-</del>	<del></del>		DELETE	3.4. CITY 4.1 TITLE		-ZIP	·		<del></del>	Change	e Addition	
NAME					4. 2 NAM								
STREET ADDRESS					4.3 STREE		DORESS						
CITY-ST-ZIP					4.4 CITY -								
TITLE				☐ DELETE	5.1 TITLE						Change	Addition	
NAME					5.2 NAME	E							
STREET ADORESS	[				5.3 STREE	ET A	DDRESS						
CITY-ST-ZIP					5.4 CITY-	-ST-	- ZIP						
TITLE				DELETE	6.1 TITLE						☐ Change	Addition	
NAME					6.2 NAME	E	1						
STREET ADDRESS					6.3 STREE	ET A	DDRESS						

14. Thereby 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, on an attachment with an address.

OLONATURE.

1-0

7**8**-98 (561)368-540

**FILED** 

Feb 02 1998 8:00am

Secretary of State