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

Mailing Address

14277 WALSINGHAM RD.

LARGO FL 33774-3233

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

14277 WALSINGHAM RD.

SIGNATURE:

LARGO FL 34644-



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000024618 (6)

ARCHITECTURE TROPICA, INC.

					03/19/1996	Ja. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 59-339/295	Applied For Not Applicab
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for int	
24 <i>33</i> 7 7		29	30	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Florida Statutes	
	9. Name and Address of Current	Registered Agent	- B	Name	10. Name and Address of New Regi	Hered Agent
TUDOR, ALEXANDER				INAITHE		
14277 WALSINGHAM RD. LARGO FL 3 4644 33774				82 Street Address (P.O. Box Number is Not Acceptable) 83		
			, 84	4 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the abo	ve-named o	corporation submits this statement for the pur	pose of changing its registere
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was itions of, Section 607.0505, Fl	authorized b lorida Statuti	y the corposes.	oration's board of directors, I hereby accept	he appointment as registered
SIGNATURE	Standare typed or printed name of registered ago:	of and title if applicable. (NO	TE: Radistered A	pent signature r	required when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
THTLE	PSTD	DELETE	1.1 TITLE			Change Additi
NAME	TUDOR, ALEXANDER		1.2 NAM	:		
STREET ADDRESS	14277 WALSINGHAM RD.		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	LARGO FL 34644		1.4 CITY	-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE			Change Additi
NAME			2.2 NAM			
STREET ADDRESS			2.3 \$TRE	ET ADDRESS		
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NAME			3.2 NAMI	i		
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NAME			6.2 NAM	£		
STREET ADDRESS			6.3 STRE	ET ADORESS		
CITY-ST-ZIP			6.4 CITY			
14. I do here informatio I am an o appears	by certify that the information supplied on indicated on this annual report or p officer or director of the corporation in Block 12 or Block 13 if changed	I with this filing does not qua upplemental annual report is the receiver or trustee empor on in attachment with an ac	lify for the ex true and ac wered to exi idress.	kemption st curate and ecute this re	lated in Section 119.07(3)(i), Florida Statutes, that my signature shall have the same legal in eport as required by Chapter 607, Florida Statute.	I further certify that the offect as if made under oath; to itutes; and that my name