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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000029325 (3)

ARCHITECTURAL CASTINGS, INC.

## **FILED** Apr 15 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 3811 NW 20TH TER. 3811 NW 20TH TER. FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309-4404								
					<ol> <li>Date Incorporated or Qualified 03/28/1996</li> </ol>	3 <b>a.</b> Da	te of Las	l Report
2. Principal F	Place of Business	2a. Mailing Address	-u		4. FEI Number			Applied For
21 949	9 NW 9 AVE	26			65-0661075			Not Applicable
Suite, Apt		Suite, Apt. #, etc.	·····		5. Certificate of Status Desired			5 Additional Required
City & Sta	LAUDERDALE FL	City & State			Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees
- Zip 22 2	Country CA	Zip	Count	ry	8. This corporation has liability for			rs. 199,032,
24 777	9. Name and Address of Currer	29	30		Florida Statutes  10. Name and Address of New Re	Yes [		
1 41		ir uedizielen Waur		1 Name	IV. Name and Address of New Re	distaine v	igent	
	NZETTA, KENNETH			1,,,,,,,,				
3811 NW 20TH TER. FT. LAUDERDALE FL 33309			8		ess (P.O. Box Number is Not Acceptable)			
!			8	3				
			8	4 City	·	FL	85 Z	ip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Stat	tutes, the abo	ve-named cor	poration submits this statement for the	ournose of	changing	g its registered
agent. I a	_				tion's board of directors. I hereby acce		intment	as registered
12.	Signature, typed or printed name of registered ag	ent and title if applicable (N D DIRECTORS	OTE: Registered A	gent signature requ	ired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE SERS AND	DIRECTO	OBS IN 12
100	T	DELETE	1.1 TITL	<u> </u>	ADDITIONS/CHANGES TO OFFI	JENS AND	Chang	
NAME	PT 1400U		12 NAM					
STREET ADDRESS	ROBERTS LARRY 23075 LYONS 120		• "	et address				
COY-SI-ZIP	BOCA RATON FL	33428		-ST-ZIP				
TITLE	VS	☐ DELETE	2.1 TITU	<del></del>			Chang	je Addition
N4ME	I ANZETTA . KENDET.	H	2.2 NAM	E				
STREET ADDRESS			2.3 STR	ET ADORESS				
CITY-ST-ZIP	DAKLAND PACK PL	33309	2 4 CM	/-\$1-ZiP				
THUE		☐ DELETE	3.1 TITLE		,	. 9	Chang	e Addition
NAME			3.2 NAM	E .				
STREET ADORESS			3.3 STR	ET ADDRESS				
CHY+S1+ZiP			3.4. CITY	-ST-ZIP				
TOLE		☐ DELETE	4.1 TITL	·			Chang	ge Addition
NAME			4. 2 NAN	AE				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-7IP			44 CITY	- ST-ZIP				
TITLE		☐ DELETE	5.1 TITL	E			Chang	ge Addition
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STR	ET ADDRESS				
CHY-ST-ZIP			5.4 CITY	- ST - ZIP				
TITLE		☐ DELETE	6.1 TITL				Chang	ge 🔲 Addition
NAME			6.2 NAM	E				
STREE* ADDRESS			6.3 STR	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				

14. I do 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.