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FILED  
Feb 02 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 # P96000043766 (0)

1. Corporation Name

ARCHITECTURAL BUILDING GROUP, INC.



Principal Place of Business

533 N.E. 13TH STREET  
FORT LAUDERDALE FL 33304

Mailing Address

533 N.E. 13TH STREET  
FORT LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1996

4. FEI Number

65-0661164

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$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

2. Principal Place of Business

21 2139 UNIVERSITY DR

2a. Mailing Address

26 2139 UNIVERSITY DR

Suite, Apt. #, etc.

22 SUITE # 101

Suite, Apt. #, etc.

27 SUITE # 101

City & State

23 CORAL SPRINGS FLA

City & State

28 CORAL SPRINGS FLA

Zip

24 33071

Country

25 Broward

Zip

29 33071

Country

30 Broward

9. Name and Address of Current Registered Agent

SCHIFFRIN, MICHAEL  
C/O MICHAEL SCHIFFRIN & ASSOCIATES, P.A.  
1 SOUTHEAST THIRD AVENUE, SUITE 1400  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 the fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SOLOMON, BARRY S  
STREET ADDRESS 533 N.E. 13TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33304

TITLE VD ☐ DELETE

NAME FOLLES, GEORGE  
STREET ADDRESS 533 N.E. 13TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33304

TITLE S ☐ DELETE

NAME SCHIFFRIN, MICHAEL  
STREET ADDRESS 1 S.E. 3RD AVENUE, SUITE 1400  
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

BARRY S Solomon

1-26-98 954-463-7560

CR2E034 (10/97)