2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
04-17-2001 90074 005 ***150.00

0398924

DOCUMENT # P96000054298

1. Entity Name
ARCHITRONICS ARCHITECT, INC.

Principal Place of Business	Mailing Address
19080 N.W. 78TH AVENUE MIAMI FL 33015	P.O. BOX 174105 HIALEAH FL 33017 US

A0050596

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1061 SW 29th Street	P.O. Box 990164
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: NAPLES, FLORIDA	City & State: NAPLES, FLORIDA
Zip: 34117 Country: USA	Zip: 34116 Country: USA

4. FEI Number 65-0718631 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ZDRAVKOVIC, GRACIELA
19080 N.W. 78TH AVENUE
MIAMI FL 33015

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE	PD	☒ Change ☐ Addition
NAME	ZDRAVKOVIC, GRACIELA		NAME	ZDRAVKOVIC, GRACIELA	
STREET ADDRESS	19080 N.W. 78TH AVENUE		STREET ADDRESS	1061 SW 29th Street	
CITY-ST-ZIP	MIAMI FL 33015		CITY-ST-ZIP	NAPLES, FLORIDA 34117	
TITLE	V	☐ Delete	TITLE	V	☒ Change ☐ Addition
NAME	ZDRAVKOVIC, WILLIAM		NAME	ZDRAVKOVIC, WILLIAM	
STREET ADDRESS	19080 N.W. 78TH AVENUE		STREET ADDRESS	1061 SW 29th St.	
CITY-ST-ZIP	MIAMI FL 33015		CITY-ST-ZIP	NAPLES FL. 34117	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: G Zdravkovic GRACE ZDRAVKOVIC 4/9/01 954 557-0961
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #