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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057701 (0)

FILED May 08 1998 8:00am Secretary of State

MOREARCHITECTURE, INC. Principal Place of Business Mailing Address 42 HIDDEN COVE 42 HIDDEN COVE VALPARAISO FL 32580 VALPARAISO FL 32580 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3390623 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MORE, LARRY B **42 HIDDEN COVE** 82 Street Address (P.O. Box Number is Not Acceptable) VALPARAISO FL 32580 **R3** 64 City Zip Code 85 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 preted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. CEO DELETE Change ☐ Addition TITLE 1.1 TITUE TIMOTHY, JANIS A 1.2 NAME NAME 42 HIDDEN COVE STREET ADDRESS 1.3 STREET ADDRESS VALPARAISO FL 32580 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TIMOTHY, JANIS A NAME 2.2 NAME **42 HIDDEN COVE** STREET ADDRESS 2.3 STREET ADDRESS VALPARAISO FL 32580 CITY-ST-ZIP 2 4 CHTY-S1-ZIP DELETE Addition TITLE 3.1 TITLE Change MORE, LARRY B NAME 3.2 NAME **42 HIDDEN COVE** STREET ADDRESS 3.3 STREET ADDRESS VALPARAISO FL 32580 CITY-ST-ZIP 3.4. CITY - S1 - ZIP TITLE DELETE 4.1 TITLE Change Addition # 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETÉ Change 7 Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ DELETE Change ☐ Addition TITLE 61 TITLE NAME 6 2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

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, or on an attachment with an address.

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