2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 10, 2002 8:00 am Secretary of State P97000102555 DOCUMENT # 1. Entity Name ARCHITECTURAL CONCEPTS AND MILLWORK INC. 05-10-2002 90007 034 ***150.00 Mailing Address Principal Place of Business 3501 UNIVERSITY DR 3501 UNIVERSITY DR. . . STE 211 STE 211 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business LANE 3. Mailing Address 7716 HIBSCUS LANE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Applied For 4. FEI Number 65-0796798 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent GEFTMAN, MARC Street Address (P.O. Box Number is Not Acceptable) 3501 UNIVERSITY DRIVE **STE 211 CORAL SPRINGS FL 33065** Zip Code ubmits this state rpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named of SIGNATURE and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing . \$5.00 May Be Tax filing requirement and elects to do so. After May 1-2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. CR2E034 (9/01) ☐ Addition **PDS** TITLE Delete TITLE 6 HIBISCUS GEFTMAN, MARC NAME NAME 3501 UNIVERSITY DR STE 211 STREET ADDRESS STREET ADDRESS CORAL SPGS FL 33065 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition | TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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 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 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 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 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 supplied with this filing does not provide a supplied with the information of the certification of the corporation or the received as a supplied with this filing does not provide a supplied with this filing does not provide a supplied with this filing does not provide a supplied with the information of the certification of the certificat changed, or on an attachme