AMENDED

FILED

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	R PROFIT CORPORAT	
UNIFORM	BUSINESS REPORT	(UBI
DOCUMENT # 1. Entity Name	P98000001691	
ARCHITECTURAL STUD	DIO, INC.	



03 MAY 13 PH 1:55

SECRETARY OF STATE

									1/31	-L-A~(A)	ბალ	FLORIDA		
Principal Place of Business 2400 HIGH RIDGE RD STE 100 BOYNTON BEACH FL 33426		Mailing Address 2400 HIGH RIDGE RD STE 100 BOYNTON BEACH FL 33426												
2. Principal Place of Business		3. Mailing Address												
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES							
City & State			City & State				4 . F	El Number 65-080	7938			pplied For ot Applicable		
Zip Country			Zip	Zip Country					Certificate of Status De			\$8.75 Ad Fee Require		
	6. Name	and Address of Current F	Registere	d Agent				7. N	Name and Address of	New Reg	istered .	Agent		_
						Name								
DISHER, S	scott b H ridge ri)			-	Street A	ddress (P.	(P.O. Box Number is Not Acceptable)						$\frac{1}{2}$
					-									-[
STE 100														
BOYNTON BEACH FL 33426						City		FL				Zip Code		
	named entity tions of regist	submits this statement for ered agent.	the purpo	ose of changing its r	egistere	d office o	r registere	d age	ent, or both, in the State	of Floric	da. Lam	familiar with,	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent ar	nd title if appli	cable. (NOTE:	Registered	Agent signat	ure required w	vhen re	rinstating)	-	CATE			
-	THE MOMEN	L EEE 10 0450 00												7
		!_EEE IS \$150.00 3 Fee will be \$550.00							9. Election Campa	ign Finar	ncing	\$5: 0)0 Mav Be	
	• •	Florida Department of	State						Trust Fund Cont	ribution.		☐ Ádde	d to Fees	
		OFFICERS AND D	l	20	144				DITIONS (OLIANOES T	0.05510	EDC AND	N DIDEOTOR	0.01.11	4
10.	PD	OFFICERS AND L	JIRECTOR		11.		1.70	AD	DITIONS/CHANGES T	O UFFIC	EHS ANL			-
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NAME	DISHER, SCOTT B						7400		ian Didea Rd					
STREET ADDRESS 2400 HIGH RIDGE RD STE 100 CITY-ST-ZIP BOYNTON BEACH FL 33426					T ADDRESS	2400	۱۳۰۰ - ما	Geach El	334	126				
CITY-ST-ZIP		DEAUTI FL 33420			CHY-	ST-ZIP	BOALL	ustad, David 100 High Ridge Rd Ste 100 Inton Beach, FL 33426						1
TITLE	VD			☐ Delete	TITLE							Change	Addition	
NAME	CAPONIGRO, CHRISTOPHER				NAME					774		717		
STREET ADDRESS	2100 111011 1110 012 110 012 100				STREE	T ADDRESS		1	200011 05/22/03—010		ากัด	##KT 25	<u>.</u>	
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TITLE	VD			Delete	TITLE							☐ Change	☐ Addition	7
NAME	CONSTAN	TINO, TARNOWSKI		•	NAME							_ •	_	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT BUNGATURE REDURED

SIGNATURE AND TYPED OR PRINTED NAME OF SHORTING OFFICER OR DIRECTOR

5.5.03

561-733-8800