## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

SUITE A-4

1705 S FEDERAL HWY

DELRAY BEACH FL 33483

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

Principal Place of Business

DELRAY BEACH FL 33483

1705 S FED HWY

STE A-4

DOCUMENT # \$13523

RICK BRAUTIGAN ARCHITECTURE, INC.

11/16/1990 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0224719 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 23 28 Country Country Zip 8. This corporation owes the current year Intangible Zip □No 30 Personal Property Tax. 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BRAUTIGAN, PAUL RICHARD Street Address (P.O. Box Number is Not Acceptable) 1705 S. FEDERAL HWY, SUITE A-4 83 **DELRAY BEACH FL 33483** 85 Zip Code 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change 11 TITLE TITLE BRAUTIGAN, PAUL RICHARD 1.2 NAME NAME 1.3 STREET ADDRESS 1705 S. FEDERAL HWY, SUITE A-4 STREET ADDRESS DELRAY BEACH FL 33483 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 21 TITLE TITLE BRAUTIGAN, PAUL RICHARD 22 NAME NAME 100 E LINTON BLVD. 305A 2.3 STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP C/TY-ST-ZIP Addition ☐ DELETE ☐ Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP

CITY-ST-ZIP th this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is 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 elver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the thin that my name appears in the same legal effect as if made under oath; that I am an elver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the same legal effect as if made under oath; that I am an elver of trustee empowered is executed by Chapter 607, Florida Statutes. 14. I hereby certify that the information supplied t indicated on this annual report or supplement officer or director of the corporation or the Block 12 or Block 13 if changed, or on an

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

SIGNATURE AND TYPED O

☐ DELETE

DELETE

FILED

May 01, 1999 8:00 am Secretary of State

05-01-1999 90005 003 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Change

CR2E034 (11/98)

Addition

Addition