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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # MANNY ARCHITECTURAL ARTS, INC. Principal Place of Business 15626 62 PL N LOXAHATCHEE FL 33470

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

S16978

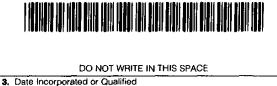
(6)

Mailing Address

15626 62 PL N

LOXAHATCHEE FL 33470

FILED Apr 14 1998 8:00am Secretary of State



,					,	12/0//1990		
2. Principal P	lace of Business	2a. Mailing Addre	ss			4. FEI Number	Ar	oplied For
21		26	26			65-0227158	N	ot Applicable
Suite, Apt.	Suite, Apt. #, etc.		Suite, Apt. #, etc.			. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	0	City & State			·	6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zιρ	Coul	ntry		8. This corporation owes or has paid the cu	rrent year Int	tangible
24	25	29	30			Personal Property Tax due June 30.	Yes] No
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registered	Agent	
GRANDA, LUCRECIA ESQUIRE					Vame			
1831 S.W. 27TH AVE.				82 8	Street Addr	ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33145				Street Address (F.O. Box Number is Not Acceptable)				
770 mil 1 E 00 1 1 0				83				
			\ \				[]	
				84 (City	FL	 85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	02 and 607 1508. Florida	Statutes the ab	nove-n	amed corp	oration submits this statement for the purpose of		ts 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.								
agent. I a	m tamiliar with, and accept the oblig	Pations of, Section 607.0	505, Florida Stati	uies.				1
SIGNATURE	Signature, typed or printed name of registered age	ned need tella if Breedy philo	(NO1) - Posiclered	Agente	ionahura raguur	ed when reinstating) DATE		
12.		D DIRECTORS	13.	- Agoin e	Sprinter require	ADDITIONS/CHANGES TO OFFICERS AN	D DIBECTOR	RS IN 12
TITLE	PSD	DEL		LE		ABBITIONS/OFFINGES TO OFFIGERS THE	Change	Addition
NAME	ALVAREZ, MANUEL B.		12 N					
					DOLEC			
STREET ADDRESS	·			1.3 STREET ADDRESS				,
CITY-ST-ZIP	LOXAHATCHEE FL			1.4 CITY - ST - ZIP 2.1 TITLE			Change	☐ Addition
TITLÉ		ווט ענו					LT CHAINE	LJ Addition
NAME			2.2 NA					Ī
STREET ADDRESS				REET AD				
CITY-ST-ZIP				TY-ST-	ZIP	<u> </u>	Change	Addition
TITLE		☐ DEL	■ -				∟ Change	L. Abbillion
NAMÉ			3.2 NA					
STREET ADDRESS			3.3 ST	REET AD	DRESS			
CITY-ST-ZIP				TY-ST-	ZIP		— 3.	F-7 :
TITLE		□ D£t	ETE 4.1 TIT	LE			Change	Addition
NAME			4 2 N/	AME				j
STREET ADDRESS			4.3 ST	REET ADI	DAESS			
CITY-ST-ZIP				TY-ST-Z	TIP .	,		
TITLE		☐ D£L	ETE 5.1 Tit	LE	ľ		Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 STI	REET AD	DRESS			Į
CITY-ST-ZIP			5.4 CII	Y-ST-Z	!P			
TITLE		☐ DEL	ETE . 6.1 T/T	LE			Change	Addition
NAME			6.2 NA	ME	į			ı
STREET ADDRESS			6.3 ST	REET AD	DRESS			
CITY - ST - ZIP			6.4 CIT	ry-st-z	ne			
14. I hereby o	certify that the information supplied v	vith this filing does not o	ualify for the exe	mptio	n stated in	Section 119.07(3)(i), Florida Statutes. I further c	ertify 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 in an attay in an attay in an address.								
SIGNATURE: PRISIDENT 4-1-98								
SIGNATURE: TESTOEN TO TO								