SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

1. Corporation Name

(3)

AFRICAN-AMERICAN ARCHITECTS, ENGINEERS, AND DESI

	GNERS ORGANIZATION, INCORPORATED										
6	Principal Place of Business 6480 S.W. 62ND AVE. MIAMI FL 33143			Mailing Address 6480 S.W. 62ND AVE. MIAMI FL 33143							
. "								DO NOT WRITE IN THIS SPACE			
	_							3. Date Incorporated or Qualified 03/13/1992			
7	2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Applied For	
21	1		26					65-0413041		Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required	
23	City & State	City & State					6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
24	Zip	Country 25	29	Zip	Cour	ntry		This corporation owes or has paid the corporation owes or has paid the corporation owes or has paid the corporation.	irrent yea	r Intangible No	
	Name and Address of Current Registered Agent							10. Name and Address of New Registere	d Agent	Jame 2	
	MIDDLEBROOKS, JOSEPH				į	81	Name				
	6480 SOUTHWEST 62ND AVE. Miami Fl 33143			•			Street Address (P.O. Box Number is Not Acceptable)				
						83					
1					}	84	City	F	85	Zip Code	

ts registered

agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agont and title if applicable. (NOTE: Registered Agont signature required when reinstating) DATE										
Signature, typed or printed name of registered agont and title If applicable. (NO: 12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1							
TITLE	PD	DELETE	1.1 TITLE	Change Addition						
NAME	MIDDLEBROOKS, JOSEPH	beceive	1.2 NAME	_ Change Establish						
STREET ADDRESS	6480 S.W. 62ND AVE.		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP							
TITLE	DVT	DELETE	2.1 TITLE	Change Addition						
NAME	GIWA, TUBOSUM		2.2 NAME							
STREET ADDRESS	273\$ S.W. 3RD AVE.		2.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP							
TITLE	DS	DELETE	3.1 TITLE	Change Addition						
NAME	ADEBISI, SURAJ		3.2 NAME	·						
STREET ADDRESS	10483 S.W. 216 ST. #103		3.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP							
TITLE		DELETE	4.1 TITLE	Change Addition						
NAME			4.2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS							
CITY-ST-ZIP			4.4 CITY-ST-ZIP							
TITLE		DELETE	5.1 TITLE	Change Addition						
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE		DELETE	6.1 TITLE	Change Addition						
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP			6.4 CITY-ST-ZIP	1. (40 DT(0)() Final Annual An						

14. 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 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 for on an attachment with an address.

305-661-2594

FILED

Jul 22 1998 8:00am

Secretary of State

Middlebrooks SIGNATURE: