

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S23736

**Entity Name:** LM ARCHITECT & ASSOCIATES, INC.

**Current Principal Place of Business:**

5491 UNIVERSITY DRIVE  
102  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

5491 UNIVERSITY DRIVE  
102  
CORAL SPRINGS, FL 33067

**FEI Number:** 65-0237508

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MOLDOFF, LEE PRESID.  
5491 UNIVERSITY DR  
STE 102  
CORAL SPRINGS, FL 33067 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name MOLDOFF, LEE  
Address 1813 MONTE CARLO WAY  
City-State-Zip: CORAL SPRINGS FL 33071

Title STD  
Name MOLDOFF, FRANCES  
Address 1813 MONTE CARLO WAY  
City-State-Zip: CORAL SPRINGS FL 33071

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEE MOLDOFF

**PRESIDENT**

**03/14/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date