

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000799

Entity Name: DOREVE NICHOLAEFF, ARCHITECT, INC.

Current Principal Place of Business:

812 MAIN STREET
OSTERVILLE, MA 02655

Current Mailing Address:

P.O. BOX 1034
OSTERVILLE, MA 02655

FEI Number: 04-2964834

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PVST
Name STARR, DOREVE
Address FIVE MANOR WAY
City-State-Zip: OSTERVILLE MA 02655

Title CD
Name STARR, DOREVE
Address FIVE MANOR WAY
City-State-Zip: OSTERVILLE MA 02655

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: DOREVE STARR

OFFICER

03/21/2014

Electronic Signature of Signing Officer/Director Detail

Date