


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000001260	
1. Entity Name ARCHSTYLE, INC.	

Principal Place of Business 927 ROSEMARY DRIVE LOUISVILLE, KY 40213	Mailing Address 927 ROSEMARY DRIVE LOUISVILLE, KY 40213
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DO NOT WRITE IN THIS SPACE



08212006 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1325611	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
SMITH, TERRY 2101 BLIND POND AVE. LUTZ, FL 33549	

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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	U00000575216 08/24/06-80005-016 150.00 <small>DATE</small>

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GANO, JOEL T 927 ROSEMARY DRIVE LOUISVILLE, KY 40213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GANO, MELISA 927 ROSEMARY DRIVE LOUISVILLE, KY 40213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u><i>Joel P. Gano, PRES.</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Aug. 20, 2006 (502) 637-7965 <small>Date Daytime Phone #</small>