2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P00000116285

Entity Name: ARCHITECTURAL HOLDINGS, INC.

FILED Sep 05, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
1600 E ROBINSON ST S ORLANDO, FL 3280359			
Current Mailing Address:		New Mailing Address:	
1600 E ROBINSON ST S ORLANDO, FL 3280359			
FEI Number: 59-3687062	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
DEAN MEAD SERVICES 800 N MAGNOLIA AVE S ORLANDO, FL 32803	STE 1500		
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATURE:			

Title:

City-St-Zip:

OFFICERS AND DIRECTORS:

ORLANDO, FL 328035947

Title:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ORLANDO, FL 328035947

Date

() Delete (X) Change () Addition ARCE, DAMARIS ARCE SAVAGE, DAMARIS Name: Name: P.O. BOX 952768 152 BAYWOOD AVENUE Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LAKE MARY, FL 32795 Title: (X) Delete Title: () Change () Addition SAVAGE, CHRISTOPHER Name: Name: Address: 152 BAYWOOD AVENUE Address: LONGWOOD, FL 32750 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: THIBAULT, DAVID Name: 152 BAYWOOD AVE Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: Title: () Delete Title: DST (X) Change () Addition SMITH, PAULETTE SMITH, PAULETTE Name: Name: Address: 1600 E ROBINSON ST STE 250 Address: 1600 E ROBINSON ST STE 250

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Ρ SIGNATURE: DAMARIS ARCE SAVAGE 09/05/2008