

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132803

Entity Name: ARCHITECTURAL STRUCTURE, INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

14521 19TH STREET  
DADE CITY, FL 335232904

## New Principal Place of Business:

16351 U.S HWY 301  
DADE CITY, FL 33523

## Current Mailing Address:

P. O. BOX 1804  
DADE CITY, FL 335232904

## New Mailing Address:

P. O. BOX 1804  
DADE CITY, FL 335231804

FEI Number: 41-2077007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONZO & MCKINNEY CPA'S  
12593 SPRING HILL DR.  
SPRING HILL, FL 34609 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: HERNANDEZ, XAVIER  
Address: 14521 19TH STREET  
City-St-Zip: DADE CITY, FL 335232904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: HERNANDEZ, XAVIER  
Address: 16351 U.S HWY 301  
City-St-Zip: DADE CITY, FL 335231804

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.

SIGNATURE: XAVIER HERNANDEZ

PRTD

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date