2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 27, 2008
Secretary of State

DOCUMENT# P05000133488

Entity Name: INTERARCH DESIGN, INC.

Current Principal Place of Business:

100 EAST MADISON STREET
SUITE 100
TAMPA, FL 33602

New Principal Place of Business:

1219 N. FRANKLIN STREET
TAMPA, FL 33602

Current Mailing Address:

523 LAKEVIEW ROAD
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-3669954 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, SANDIP I
523 LAKEVIEW ROAD
CLEARWATER, FL 33756 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: PD ( ) Delete
Name: PATEL, SANDIP I
Address: 523 LAKEVIEW ROAD
City-St-Zip: CLEARWATER, FL 33756

Title: ST ( ) Delete
Name: COLEMAN, JOSEPH
Address: 523 LAKEVIEW ROAD
City-St-Zip: CLEARWATER, FL 33756

Title: VP ( ) Delete
Name: VALLADAREZ, DAVID A
Address: 523 LAKVIEW ROAD
City-St-Zip: CLEARWATER, FL 33756 US

Title: VP ( ) Delete
Name: CHAMPION, NICOLE D
Address: 523 LAKEVIEW ROAD
City-St-Zip: CLEARWATER, FL 33756 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SANDIP PATEL PD 06/27/2008
Electronic Signature of Signing Officer or Director Date