## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P06000100133

1. Entity Name

ARCHITECTURAL DESIGNS INTERIORS, INC.



Principal Place of Business

1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605 Mailing Address

1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605

## FILED Jul 22, 2008 8:00 am Secretary of State

07-22-2008 90011 001 \*\*\*600.00

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### DO NOT WRITE IN THIS SPACE

07082008 No Chg-P

CR2E034 (11/05)

4. FEI Number 51-0611656

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KROGER, KEN 1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605

CITY-ST-ZIP

SIGNATURE:

# DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ons of registered agent.	purpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and tit	de if applicable. (NOTE Registered A	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		Election Campaign Financ     Trust Fund Contribution.	ing	\$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.
10.	OFFICERS AND DIR	ECTORS		•	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P KROGER, KEN 1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MEJIA, HERMAN 1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROWLAND, DUSTIN 1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605				
TATLE NAME STREET ADDRESS CITY-ST-ZIP	ST TONKYRO, VIRGINIA C 1320 E 9TH AVENUE, SUITE 1 TAMPA, FL 33605		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. Thereby 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.