

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

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

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

**DOCUMENT # P06000100163**

1. Entity Name  
ARCHITECTURAL DESIGNS IMAGES, 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

66015516



07082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 51-0611658	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$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 DIRECTORS**

TITLE	P
NAME	KROGER, KEN
STREET ADDRESS	1320 E 9TH AVENUE, SUITE 1
CITY-ST-ZIP	TAMPA, FL 33605

TITLE	VP
NAME	MEJIA, HERMAN
STREET ADDRESS	1320 E 9TH AVENUE, SUITE 1
CITY-ST-ZIP	TAMPA, FL 33605

TITLE	VP
NAME	ROWLAND, DUSTIN
STREET ADDRESS	1320 E 9TH AVENUE, SUITE 1
CITY-ST-ZIP	TAMPA, FL 33605

TITLE	ST
NAME	TONKYRO, VIRGINIA C
STREET ADDRESS	1320 E 9TH AVENUE, SUITE 1
CITY-ST-ZIP	TAMPA, FL 33605

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: KENNETH P. KROGER 7-16-08 813.247.1333  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #