2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# P94000013617

Entity Name: ARCHITECTURE STUDIO, INC.

Current Principal Place of Business:

114 S. MAGNOLIA AVE.
OCALA, FL 34474

New Principal Place of Business:

114 S. MAGNOLIA AVE.
OCALA, FL 34471

Current Mailing Address:

114 S. MAGNOLIA AVE.
OCALA, FL 34474

New Mailing Address:

114 S. MAGNOLIA AVE.
OCALA, FL 34471

FEI Number: 59-3263092 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RISPOLI, JOSEPH A
114 S. MAGNOLIA AVE.
OCALA, FL 34474 US

Name and Address of New Registered Agent:

RISPOLI, JOSEPH A
114 S. MAGNOLIA AVE.
OCALA, FL 34471 US

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: _____ 01/07/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: SOSA, ROLANDO
Address: 5783 NE 62ND CT. RD
City-St-Zip: SILVER SPRINGS, FL 34488

Title: PTD ( ) Delete
Name: RISPOLI, JOSEPH A
Address: 2727 SE 23RD AVE
City-St-Zip: OCALA, FL 34471

Title: VP ( ) Delete
Name: CZYZNIKIEWICZ, RONALD C
Address: 14221 SE 88TH TERRACE
City-St-Zip: SUMMERFIELD, FL 34491

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:

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: JOSEPH A. RISPOLI PTD 01/07/2008
Electronic Signature of Signing Officer or Director — Date