

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000029005

1. Entity Name
ARCHITECTURAL METAL PRODUCTS, INC.



Principal Place of Business
1315 ARMORY DRIVE NE
PALM BAY, FL 32907 US

Mailing Address
1315 ARMORY DRIVE
PALM BAY, FL 32907 US



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3235164	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

2. Name and Address of Current Registered Agent

ROBERT E REESE
1315 ARMORY DR NE
PALM BAY, FL 32907

**DO NOT WRITE
IN THIS SPACE**

3. 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

Robert E. Reese

ROBERT E. REESE 01-06-06

Signature, typed or printed name or registered agent and date of application.

(All filers registered agents signatures required when requested)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2009 Fee will be \$250.00

4. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	REESE, ROBERT E
STREET ADDRESS	1315 ARMORY DR NE
CITY-ST-ZIP	PALM BAY, FL 32907
TITLE	S
NAME	REESE, MARYANN
STREET ADDRESS	1315 ARMORY DR.
CITY-ST-ZIP	PALM BAY, FL 32907
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/19/06-80002-021-150.00

**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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attached sheet with an address, with all other like empowerment.

SIGNATURE:

Maryann Reese

CO-OWNER - SEC.

MARYANN REESE 01-06-05 321-984-180

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

DATE

Daytime Phone #