


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000068706 1. Entity Name ARCHITECTURAL METALS, INC.	
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Principal Place of Business 210 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168	Mailing Address P.O. BOX 160 NEW SMYRNA BEACH, FL 32170
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DO NOT WRITE IN THIS SPACE

07122006 No Chg-P CR2E034 (11/05)

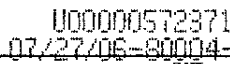
4. FEI Number 59-3326554	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRUNKILTON, RICHARD A
472 WILDWOOD DR.
NEW SMYRNA BEACH, FL 32168

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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:  07/27/06-80004-001 150.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when necessary.) DATE

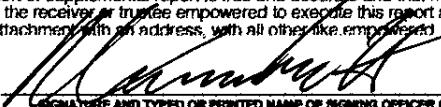
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVP CRUNKILTON, RICHARD A 472 WILDWOOD DRIVE NEW SMYRNA, FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KIRK, BRETT 2210 SABAL PALM DR. EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 employees.

SIGNATURE:  **7/12/2006** **386-428-7245**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #