2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2005 08:00 AM Secretary of State

DOCUMENT # P99000003935					<i>y</i> = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =
1. Entity Name COLONIAL ARCHITECTURAL DESIGNS, INC.					
8468 S.W. 1	ncipal Place of Business Mailing Address 168 S.W. 113TH PLACE 8468 S.W. 113TH PLACE AMI, FL 33173 MIAMI, FL 33173				
С	O NOT WRITE I	- Sample - North Allega	CE	02202005 4. FEI Numb 65-088	
TANYA, ARLENE 8468 S.W. 113TH PLACE MIAMI, FL 33173			DO NOT WRITE IN THIS SPACE		
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 agreeture required when recessaring) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				00 May Be ed to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOL, ARLENE TANYA 8468 S.W. 113TH PLACE MIAMI, FL 33173	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORON, NORMANDO 8468 S.W. 113TH PLACE MIAMI, FL 33173			_	000000248119 03/02/05-60015-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOL, EUGENIO BIDASOA 16 MADRID, SPAIN,	•			NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP		77		IN " 	THIS SPACE
TITLE NAME STREET ADDRESS ' CITY-ST-ZIP			= 	·	
TITLE NAME STREET ADDRESS GITY-ST-ZIP			-		
12. I hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), 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 it 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: EVALUATED SOLD DIAGNOTOR 2/2005 SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Data Dayuma Prome #					