

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081169

Entity Name: PROSTYLE ARCHITECTURE, INC.

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

521 CHESTNUT ST
CLEARWATER, FL 33756

Current Mailing Address:

521 CHESTNUT ST
CLEARWATER, FL 33756

New Principal Place of Business:

501 SOUTH FORT HARRISON AVENUE
SUITE 211
CLEARWATER, FL 33756

New Mailing Address:

501 SOUTH FORT HARRISON AVENUE
SUITE 211
CLEARWATER, FL 33756

FEI Number: 59-3595666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAKELARIOU, NICK K
3111 SWAN LANE
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

SAKELARIOU, NICK K
501 SOUTH FORT HARRISON AVENUE
CLEARWATER,, FL 33756 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:

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAKELARIOU, NICK K
Address: 3111 SWAN LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S () Delete
Name: SAKELARIOU, BARBARA
Address: 3111 SWAN LANE
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAKELARIOU, NICK K
Address: 32 OSPREY STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S (X) Change () Addition
Name: SAKELARIOU, BARBARA
Address: 32 OSPREY
City-St-Zip: SAFETY HARBOR, FL 34695

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: NICK SAKELARIOU

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date