

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90442 025 ***158.75

DOCUMENT # S32534

1. Entity Name

ARCHITECTURAL DESIGNS, INC.

Principal Place of Business

**1501 EAST 9TH AVE
YBOR CITY FL 33605
US**

Mailing Address

**1501 EAST 9TH AVE
YBOR CITY FL 33605
US**

2. Principal Place of Business

1320 E. 8th Avenue

Suite, Apt. #, etc.

Suite One

City & State

Tampa, FL

Zip
33605

Country
US

3. Mailing Address

1320 E. 8th Avenue

Suite, Apt. #, etc.

Suite One

City & State

Tampa, FL

Zip
33605

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3059726

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KROGER, KENNETH P.

1501 EAST 9TH AVE

YBOR CITY FL 33605

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1320 E. 8th Avenue

Suite One

City

Tampa

FL

Zip Code
33605

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PCD** ☐ Delete
NAME **KROGER, KENNETH P.**
STREET ADDRESS **1501 EAST 9TH AVE**
CITY-ST-ZIP **YBOR CITY FL 33605**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **Kroger, Kenneth P**
STREET ADDRESS **1320 E.8th Avenue, Suite One**
CITY-ST-ZIP **Tampa, FL 33605**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth P. Kroger

4/8/02

813.247.1333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)