

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054453

FILED  
Jan 08, 2006  
Secretary of State

Entity Name: ALL PRO TRAFFIC SCHOOL, INC.

## Current Principal Place of Business:

19950 S.W. 3RD PLACE  
PEMBROKE PINES, FL 33029

## New Principal Place of Business:

## Current Mailing Address:

19950 S.W. 3RD PLACE  
PEMBROKE PINES, FL 33029

## New Mailing Address:

FEI Number: 65-1079958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EGUES, ANTONIO  
19950 S.W. 3RD PLACE  
PEMBROKE PINES, FL 33029 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EGUES, ANTONIO  
Address: 19950 SW 3RD PLACE  
City-St-Zip: PEMBROKE PINES, FL 330291251

Title: TD ( ) Delete  
Name: EGUES, LOURDES  
Address: 19950 SW 3RD PLACE  
City-St-Zip: PEMBROKE PINES, FL 330291251

Title: D ( ) Delete  
Name: NIEVES, ANAMARY  
Address: 15569 MIAMI LAKEWAY NORTH #101  
City-St-Zip: MIAMI LAKES, FL 33014

Title: VPD ( ) Delete  
Name: EGUES, ANTONIO J  
Address: 19950 S.W. 3RD PLACE  
City-St-Zip: PEMBROKE PINES, FL 330291251

Title: AS ( ) Delete  
Name: RODRIGUEZ, MARIA L  
Address: 5396 W. 24TH AVENUE  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: NIEVES, ANAMARY  
Address: 8909 N.W. 178TH STREET  
City-St-Zip: MIAMI, FL 33018

Title: VPD (X) Change ( ) Addition  
Name: EGUES, ANTONIO J  
Address: 764 N.W. 163RD AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTONIO EGUES

PD

01/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date