

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 02, 2008 8:00 am**  
**Secretary of State**

06-02-2008 90003 043 \*\*\*150.00

**DOCUMENT # P03000014378**

1. Entity Name  
**A1 BONDING AGENCY INC.**



Principal Place of Business <b>220 S.E. 12 ST.          FORT LAUDERDALE, FL 33316</b>	Mailing Address <b>220 S.E. 12 ST.          FORT LAUDERDALE, FL 33316</b>
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**DO NOT WRITE IN THIS SPACE**



05092008 No Chg-P CR2E034 (11/05)

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

6. Name and Address of Current Registered Agent

**MILLMAN, SEAN  
 220 S.E. 12 ST.  
 FORT LAUDERDALE, FL 33316**

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW! FEE IS \$150.00 Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$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.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P MILLMAN, SEAN 220 S.E. 12 ST. FORT LAUDERDALE, FL 33316</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM S&amp;B Bail Bonds, Inc. 220 SE 12 Street Fort Lauderdale, FL 33316</b>
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**DO NOT WRITE 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 empowered.

SIGNATURE: Sean Millman **5/12/2008** **954-306-0990**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #