



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000117447 1. Entity Name AAA OF THE CARIBBEAN, INC.	
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Principal Place of Business 1515 N WESTSHORE BLVD TAMPA, FL 33603	Mailing Address 1515 N WESTSHORE BLVD TAMPA, FL 33603
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DO NOT WRITE IN THIS SPACE



04172008 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0486481	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'BRIEN, THOMAS E
1515 N WESTSHORE BLVD
TAMPA, FL 33603

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 _____

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P O'BRIEN, THOMAS E 1515 N. WESTSHORE BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TOMLIN, JOHN A 1515 N. WESTSHORE BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIAZ, EDWARD 1515 N. WESTSHORE BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCKEE, ROBERT A 1515 N. WESTSHORE BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BAKEWELL, KEVIN W 1515 N WESTSHORE BLVD TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/14/08-80070-022 150.00

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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:  **KEVIN W. BAKEWELL** 4/22/08 (813) 289-5057

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