

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103840

Entity Name: A TO E VENTURES, INC.

FILED
Mar 21, 2006
Secretary of State

Current Principal Place of Business:

1250 SE 26TH STREET
UNIT 106
HOMESTEAD, FL 33035

New Principal Place of Business:

2724 SE 15 ROAD
HOMESTEAD, FL 33035

Current Mailing Address:

1250 SE 26TH STREET
UNIT 106
HOMESTEAD, FL 33035

New Mailing Address:

2724 SE 15 ROAD
HOMESTEAD, FL 33035

FEI Number: 84-1686536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, CLAYRINSKI D
1250 SE 26TH STREET
UNIT 106
HOMESTEAD, FL 33035 US

Name and Address of New Registered Agent:

WILSON, CLAYRINSKI D
2724 SE 15 ROAD
HOMESTEAD, FL 33035 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: CLAYRINSKI D WILSON

03/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WILSON, CLAYRINSKI D
Address: 1250 SE 26TH STREET UNIT 106
City-St-Zip: HOMESTED, FL 33035 US

Title: VP (X) Delete
Name: WILSON, AKIKO J
Address: 1250 SE 26TH STREET UNIT 106
City-St-Zip: HOMESTEAD, FL 33035 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVDS (X) Change () Addition
Name: WILSON, CLAYRINSKI D
Address: 2724 SE 15 ROAD
City-St-Zip: HOMESTEAD, FL 33035 US

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: CLAYRINSKI WILSON

P

03/21/2006

Electronic Signature of Signing Officer or Director

Date