

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088478

Entity Name: A2CAB, INC.

FILED
Feb 02, 2011
Secretary of State

Current Principal Place of Business:

550 MARY ESTHER CUTOFF
UNIT 18
FT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

203 WARRIOR STREET
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 20-5140515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTHE, ALEXANDER R PRES
203 WARRIOR STREET
CRESTVIEW, FL 32536 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

OFFICERS AND DIRECTORS:

Title: PD
Name: BARTHE, ALEXANDER R
Address: 203 WARRIOR STREET
City-St-Zip: CRESTVIEW, FL 32536

Title: STD
Name: BARTHE, ADELE
Address: 203 WARRIOR STREET
City-St-Zip: CRESTVIEW, FL 32536

I hereby 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 all other like empowered.

SIGNATURE: ALEXANDER R BARTHE

PD

02/02/2011

Electronic Signature of Signing Officer or Director

Date