


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000083281  
 1. Entity Name  
 AAA IMPORTS, INC.



Principal Place of Business      Mailing Address  
 2560 W ORANGE BLOSSOM TRAIL      PO BOX 1659  
 APOPKA, FL 32712 US      APOKA, FL 32704 US

**DO NOT WRITE IN THIS SPACE**



03032005    No Chg-P    CR2E034 (10/03)

4. FEI Number 59-3404136	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  
 ZHU, XIAOTAN  
 1361 HOLLY GLEN RUN  
 APOPKA, FL 32703

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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**  
**After May 1, 2005 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	D ZHU, XIAOTAN 1361 HOLLY GLEN RUN APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZHU, KWEI-LIN 1361 HOLLY GLEN RUN APOPKA, FL 32703
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 03/17/05-80068-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: Xiaotian Zhu      3-14-05      4078840078  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #