2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000094366

A & R SALES INC.



FILED Apr 28, 2008 08:00 AN Secretary of State

			No. of the last of				
7241 PROVI	e of Business DENCE ROAD EACH, FL 33462-5641	Mailing Address 7241 PROVIDENCE ROAD BOYNTON BEACH, FL 33462	-5641				
				04082008	No Chg-P	CR2E0	34 (11/05)
	O NOT WRIT	CE	4. FEI Numb	ner		Applied For	
				65-098	59010		Not Applicable \$8.75 Additional
				5. Certificate	of Status Desired		Fee Required
6. Name and Address of Current Registered Agent SAVOIA, ANTHONY 7241 PROVIDENCE RD. BOYNTON BEACH, FL 33436				33 5 1 1 1 1 1 1 1 1 1 1	NOT WITHIS SE	随便 流动的	Radio St. Design Commenced in
		for the purpose of changing its registe	red office or register	ed agent, or bo	oth, in the State of Flo	orida. I am I	amillar with, and accept
the obligations of registered agent. SIGNATURE ASLEVANTY STATE OSEMBRY SAVAID 4/VS/88 Signature. hyped or printed reprinted agent and title II applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				.00 May Be ed to Fees	U0000)925475	
10.	OFFICERS AN	ID DIRECTORS	NOTE: THE	anta (ma)	05/20/08	-30030 -	101 15U U
TITLE	D .						
NAME	SAVOIA, ROSEMARY						
STREET ADDRESS CITY-ST-ZIP	7241 PROVIDENCE ROAD BOYNTON BEACH, FL 33436						
TITLE							
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STREET ADDRESS (CITY-ST-ZIP				DO	NOT W	RITE	
TITLE					Kirk Elikabi elikabili "Nili".		脚門 4.0 mm 中央部署 14.50mm (1.50mm)
NAME				IN	THIS SF	AUL	
STREET ADDRESS			州 加克。				
CITY-ST-ZIP							
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NAME Street address							
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NAME						1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
STREET ADDRESS					型的数数		
CITY-ST-ZIP			Military of the		图 电精制设置		
	ertify that the information supplied wi	ith this filing does not qualify for the ex					

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 attactment with an address, with all other like empowered.

SIGNATURE: X

Daysina Phone #