

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088478

Entity Name: A2CAB, INC.

Current Principal Place of Business:

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

Current Mailing Address:

203 WARRIOR STREET
CRESTVIEW, FL 32536

FEI Number: 20-5140515

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARTHE, ALEXANDER RPRES
203 WARRIOR STREET
CRESTVIEW, FL 32536 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD	Title	STD
Name	BARTHE, ALEXANDER R	Name	BARTHE, ADELE
Address	203 WARRIOR STREET	Address	203 WARRIOR STREET
City-State-Zip:	CRESTVIEW FL 32536	City-State-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'

OWNER

03/30/2014

Electronic Signature of Signing Officer/Director Detail

Date