

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 168806

FILED
Jan 28, 2009
Secretary of State

Entity Name: A-1 BLOCK CORPORATION

Current Principal Place of Business:

%ANTHONY DACATO
1617 S DIVISION ST
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

%ANTHONY DACATO
1617 S DIVISION ST
ORLANDO, FL 32805 US

New Mailing Address:

FEI Number: 59-0671726 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, ADAM
1617 S DIVISION
ORLANDO, FL 32805 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: FREEMAN, GAIL
Address: 1617 S DIVISION STREET
City-St-Zip: ORLANDO, FL 32805

Title: VPD () Delete
Name: FREEMAN, JOHN
Address: 1617 SO DIVISION AVE
City-St-Zip: ORLANDO, FL

Title: P () Delete
Name: FREEMAN, ADAM S.
Address: 1617 S. DIVISION AVE.
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: FREEMAN, JOHN
Address: 1617 SO DIVISION AVE
City-St-Zip: ORLANDO, FL 32805

Title: P (X) Change () Addition
Name: FREEMAN, ADAM S.
Address: 1617 S. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

I hereby certify that the information supplied with this filing does not qualify 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: ADAM FREEMAN

PRES

01/28/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date