## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 269993**

Entity Name: AA SALES, INC.

FILED Apr 27, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4529 EAST 10TH LANE HIALEAH, FL 33013 **Current Mailing Address: New Mailing Address:** 4529 EAST 10TH LANE HIALEAH, FL 33013 FEI Number: 59-1006548 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, DOUGLAS G 422 CATALONIA AVE CORAL GABLES, FL 33134 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition WILLIAMS, DOUGLAS G Name: Name: 422 CATALONIA AVE. Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition Name: WILLIAMS, JOY BETH Name: WILLIAMS, JOY BETH 1241 HOLLYWOOD BLVD 1241 HOLLYWOOD BLVD Address: Address: HOLLYWOOD, FL 33019 City-St-Zip: HOLLYWOOD, FL Citv-St-Zip: ( ) Delete Title: Title: () Change () Addition WILLIAMS, CATHERINE H Name: Name: 422 CATALONIA AVE. Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WILLIAMS, WILLIAM G WILLIAMS, WILLIAM G Name: Name: Address: 1241 HOLLYWOOD BLVD Address: 1241 HOLLYWOOD BLVD City-St-Zip: HOLLYWOOD, FL City-St-Zip: HOLLYWOOD, FL 33019 Title: SD Title: (X) Change ( ) Addition ( ) Delete WILLIAMS, BARBARA B Name: WILLIAMS, BARBARA B Name: 1241 HOLLYWOOD BLVD Address: 1241 HOLLYWOOD BLVD Address: City-St-Zip: HOLLYWOOD, FL City-St-Zip: HOLLYWOOD, FL 33019 Title: () Delete Title: VPD ( ) Change (X) Addition WILLIAMS, PAUL A Name: Name: 422 CATALONIA AVE. Address: Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS G. WILLIAMS PD 04/27/2006