

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # 563910 1. Entity Name AA AUTO DRIVING SCHOOL, INC.	
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Principal Place of Business 7305 W FLAGLER ST MIAMI, FL 33144	Mailing Address 7305 W FLAGLER ST MIAMI, FL 33144
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DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1810652	Applied For ☐ Not Applicable
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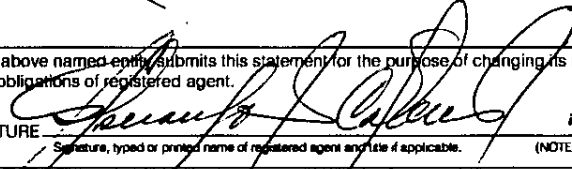
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**COLMENERO, JOSE A.
4360 S.W. 2ND TERR.
MIAMI, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

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 	ESPERANZA J. COLMENERO	2/14/07
Signature, typed or printed name of registered agent and date if applicable.		DATE

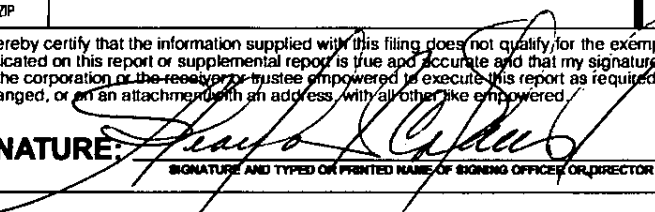
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000649900 03/07/07-80070-024 158.75
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10. OFFICERS AND DIRECTORS

TITLE PTD	COLMENERO, REYNALDO
NAME	4380 SW 5TH STREET
STREET ADDRESS	MIAMI, FL 33134
CITY-ST-ZIP	
TITLE SD	COLMENERO, ESPERANZA J.
NAME	7305 W FLAGLER ST
STREET ADDRESS	MIAMI, FL 33144
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	2/14/07	305 264-6161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #