

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 21, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F04000001702**

1. Entity Name  
AAA PROMOTIONS, INC.



Principal Place of Business  
1500 W. CYPRESS CREEK ROAD, SUITE 303  
FT. LAUDERDALE, FL 33309

Mailing Address  
1500 W. CYPRESS CREEK ROAD, SUITE 303  
FT. LAUDERDALE, FL 33309

**DO NOT WRITE IN THIS SPACE**



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number  
52-1991691

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

KING, CONNIE  
1500 W. CYPRESS CREEK ROAD, SUITE 303  
FT. LAUDERDALE, FL 33309

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PC
NAME	KING, CONNIE
STREET ADDRESS	1500 W. CYPRESS CREEK ROAD, SUITE 303
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	DST
NAME	KING, CLIFF
STREET ADDRESS	1500 W. CYPRESS CREEK ROAD, SUITE 303
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	D
NAME	ROSENBERG, KEITH
STREET ADDRESS	1280 SW 36TH AVENUE SUITE 200
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000188594  
01/24/05-80062-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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:**

*Connie King* CONNIE KING, PRES. 1/18/05 954.489.1225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #