

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F31495

Entity Name: B & A ASSOCIATES, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

6466 N.W. 5 WAY
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

2953 W CYPRESS CREEK RD. #101
FORT LAUDERDALE, FL 33309

Current Mailing Address:

6466 N.W. 5 WAY
FORT LAUDERDALE, FL 33309

New Mailing Address:

2953 W CYPRESS CREEK RD #101
FORT LAUDERDALE, FL 33309

FEI Number: 59-2089889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASSARIELLO, JOHN
6466 N.W. 5 WAY
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

PASSARIELLO, JOHN
2953 W CYPRESS CREEK RD #101
FORT LAUDERDALE, FL 33309 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: JOHN PASSARIELLO

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOSKOWITZ, WILLIAM,
Address: 6466 NW 5 WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: STD () Delete
Name: MOSKOWITZ, ARLENE,
Address: 6466 NW 5 WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOSKOWITZ, WILLIAM,
Address: 2953 W CYPRESS CREEK RD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: STD (X) Change () Addition
Name: MOSKOWITZ, ARLENE,
Address: 2953 W CYPRESS CREEK RD
City-St-Zip: FORT LAUDERDALE, FL 33309

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: WILLIAM MOSKOWITZ

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date