FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G28783 (0)

1. Corporation Name
A & A CONTRACTORS, INC.

Principal Place of Business	Mailing Address
2501 W. HILLSBORO BLVD..STE.104 DEERFIELD BEACH FL 33442-8437	2501 W. HILLSBORO BLVD..STE.104 DEERFIELD BEACH FL 33442-8437

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/22/1983
3a. Date of Last Report: 05/11/1994

2. Principal Place of Business
21: 1910 NW 44 St
22: Suite, Apt. #, etc.
23: Pompano, Fl
24: 33064 Zip
25: Country

2a. Mailing Address
26: 1910 NW 44 St
27: Suite, Apt. #, etc.
28: Pompano, Fl
29: 33064 Zip
30: Country

4. FEI Number: 59-2276649 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ADAMS, PAUL
1420 SE 13TH ST
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name: Adams, Paul
82 Street Address (P.O. Box Number is Not Acceptable): 1910 NW 44 St
83:
84 City: Pompano FL 85 Zip Code: 33064

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	1.1 TITLE	V	☒ Change ☐ Addition
NAME	VIGNONE, ANTHONY	1.2 NAME	Vignone, Anthony	
STREET ADDRESS	2501 W. HILLSBORO BLVD.	1.3 STREET ADDRESS	1910 NW 44 St	
CITY-ST-ZIP	DEERFIELD BEACH FL	1.4 CITY-ST-ZIP	Pompano, Fl 33064	
TITLE	PD	2.1 TITLE	PD	☒ Change ☐ Addition
NAME	ADAMS, PAUL	2.2 NAME	Adams, Paul	
STREET ADDRESS	2501 W HILLSBORO BLVD	2.3 STREET ADDRESS	1910 NW 44 St	
CITY-ST-ZIP	DEERFIELD BEACH FL	2.4 CITY-ST-ZIP	Pompano, Fl 33064	
TITLE	S	3.1 TITLE	S	☒ Change ☐ Addition
NAME	SEYMOUR, MARSHA	3.2 NAME	Seymor, Marsha	
STREET ADDRESS	2501 W. HILLSBORO BLVD.	3.3 STREET ADDRESS	1910 NW 44 St	
CITY-ST-ZIP	DEERFIELD BEACH FL	3.4 CITY-ST-ZIP	Pompano, Fl 33064	
TITLE	V	4.1 TITLE	V	☒ Change ☐ Addition
NAME	ADAMS, RONALD	4.2 NAME	Adams, Ronald	
STREET ADDRESS	2501 W. HILLSBORO BLVD.	4.3 STREET ADDRESS	1910 NW 44 St	
CITY-ST-ZIP	DEERFIELD BEACH FL	4.4 CITY-ST-ZIP	Pompano, Fl 33064	
TITLE	T	5.1 TITLE	T	☒ Change ☐ Addition
NAME	ADAMS, HELEN	5.2 NAME	Adams, Helen	
STREET ADDRESS	2501 W. HILLSBORO BLVD.	5.3 STREET ADDRESS	1910 NW 44 St	
CITY-ST-ZIP	DEERFIELD BEACH FL	5.4 CITY-ST-ZIP	Pompano, Fl 33064	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul Adams - Paul Adams 4-27-95 305-973-3831
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0266528 CP