2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 22, 2006 8:00 am **Secretary of State** DOCUMENT # L58315 1. Entity Name 02-22-2006 90003 040 ***150.00 A & D ENTERPRISES, INC. Principal Place of Business Mailing Address 9332 SANDY RUN 9332 SANDY RUN JUPITER FL 33478 JUPITER FL 33478 2. Principal Place of Business 3. Mailing Address 17622 103rd Terrace N. P.O. Box 1701 Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Jupiter, FL 33478 Jupiter, FL 33468 City & State City & State 4. FEI Number Applied For 65-0180102 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33478 33468 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>Sentelik, Andrew P</u> SENTELIK, ANDREW P Street Address (P.O. Box Number is Not Acceptable) 17622 103rd Terrace N. 9332 SANDY RUN JUPITER FL 33478 Zip Code Jupiter 33478 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, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, 11. TITLE X Change Addition DILE ☐ Delete D NAME SENTELIK, ANDREW P. NAME Sentelik, Andrew P. STREET ADDRESS STREET ADDRESS 9332 SANDY RUN 17622 103rd Terrace N. CITY-ST-ZIP Jupiter, FL 33478 VST CITY+SI-ZiP JUP!TER FL Delete TITL€ Change Addition SENTELIK, AMANDA D. NAME NAME - -Sentelik, Amanda D. ___ STREET ADDRESS STREET ADDRESS 9332 SANDY RUN 17622 103rd Terrace N. CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Jupiter, FL 33478 -11111 - Delete- · --TITLE. NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete TITLE THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST+7IP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

FILED

(561) 744-7135