

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # L72829

1. Entity Name
AA AFFORDABLE SEAWALL INC.



Principal Place of Business
**17 NE 5TH ST
POMPANO BEACH, FL 33060-6121 US**

Mailing Address
**17 NE 5TH ST
POMPANO BEACH, FL 33060-6121 US**

FILED
Jan 12, 2006 08:00 AM
Secretary of State



01062006 No Chg-P CR2E034 (11/05)

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4. FEI Number **85-0209657** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GRIMM, DARRELL W.
17 N.E. 5TH STREET
POMPANO BEACH, FL 33060-6121**

**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 *Darrell Grimm* **Darrell Grimm** 1-9-06
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, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRIMM, DARRELL W. 17 NE 5TH STREET POMPANO BEACH, FL 330606121
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01/12/06-80039-020 150.00

**DO NOT WRITE
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: *Darrell Grimm* **Darrell Grimm**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-06 **954-946-0720**
954-931-9866
Date Daytime Phone #