2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M53115

Entity Name: A & P MOVING INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8591 NW 72 STREET MIAMI, FL 33166			8585-8591 NW 72 STF MIAMI, FL 33166	8585-8591 NW 72 STREET MIAMI, FL 33166	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8591 NW 72 STREET MIAMI, FL 33166			8585-8591 NW 72 STF MIAMI, FL 33166	8585-8591 NW 72 STREET MIAMI, FL 33166	
FEI Number	: 59-2817585	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	DEZ, SONIA 141ST AVE 33175 US				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (FERNANDEZ, 1991 SW 1418 MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (FERNANDEZ, 1991 SW 1418 MIAMI, FL 331	ST AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ne: CASTELLANOS, MILAGROS ress: 1991 SW 141ST AVE.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	A (CASTELLANO: 1991 SW 141. MIAMI, FL 331	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: SONIA FERNANDEZ VP 04/27/2006