

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010613

**FILED**  
**Jan 12, 2006**  
**Secretary of State**

**Entity Name:** A & A DRAINAGE & VAC SERVICES, INC.

**Current Principal Place of Business:**

20401 SW 49 CT  
FT LAUDERDALE, FL 33332

**New Principal Place of Business:**

20401 SW 49 CT  
SOUTHWEST RANCHES, FL 33332

**Current Mailing Address:**

20401 SW 49 CT  
FT LAUDERDALE, FL 33332

**New Mailing Address:**

13846 NW 14 ST  
PEMBROKE PINES, FL 33028

**FEI Number:** 65-0981530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCRIMA, JAMES  
13846 NW 14 STREET  
PEMBROKE PINES, FL 33028 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCRIMA, DIANNE L  
Address: 20401 SW 49 CT  
City-St-Zip: FORT LAUDERDALE, FL 33332

Title: VP ( ) Delete  
Name: SCRIMA, JAMES  
Address: 13846 NW 14 STREET  
City-St-Zip: HOLLYWOOD, FL 33028

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SCRIMA, JAMES  
Address: 13846 NW 14 STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: TR (X) Change ( ) Addition  
Name: SCRIMA, DIANNE L  
Address: 20401 SW 49 CT  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

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:** JAMES SCRIMA

P

01/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date