

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000031741

**FILED**  
**Feb 10, 2011**  
**Secretary of State**

**Entity Name:** A-WON TROPHIES ETC., INC.

**Current Principal Place of Business:**

533 SE MLK, JR BLVD  
BELLE GLADE, FL 33430

**New Principal Place of Business:**

533 DR. MARTIN LUTHER KING JR BLVD E  
BELLE GLADE, FL 33430 US

**Current Mailing Address:**

533 SE MLK, JR BLVD  
BELLE GLADE, FL 33430

**New Mailing Address:**

533 DR. MARTIN LUTHER KING JR BLVD E  
BELLE GLADE, FL 33430 US

**FEI Number:** 65-0995665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ISON, FRANK D  
1083 WEDGWORTH ROAD  
BELLE GLADE, FL 33430 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: ISON, FRANK D  
Address: 1083 WEDGWORTH ROAD  
City-St-Zip: BELLE GLADE, FL 33430 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK D. ISON

PST

02/10/2011

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

\_\_\_\_\_  
Date