

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118558

FILED
Mar 20, 2007
Secretary of State

Entity Name: A & A PROPERTIES HOLDING COMPANY

Current Principal Place of Business:

2475 BRICKELL AVE.
APT. NO 1510
MIAMI, FL 33129

New Principal Place of Business:

1835 NW 112 AVE
SUITE 159
MIAMI, FL 33172

Current Mailing Address:

7575 WEST FLAGLER STREET, #204
MIAMI, FL 33144

New Mailing Address:

1835 NW 112 AVE
SUITE 159
MIAMI, FL 33172

FEI Number: 60-0499406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASCHALIDES, ASTRID
2475 BRICKELL AVE.
APT. 1510
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

PASCHALIDES, ASTRID
1835 NW 112 AVE
SUITE 159
MIAMI, FL 33172 US

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: ASTRID PASCHALIDES

03/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PASCHALIDES, ASTRID
Address: 2475 BRICKELL AVE., APT. 1510
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: CARRASCO, ANA MARIA
Address: 2475 BRICKELL AVE., APT. N #1510
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PASCHALIDES, ASTRID
Address: 1835 NW 112 AVE, SUITE 159
City-St-Zip: MIAMI, FL 33172

Title: D (X) Change () Addition
Name: CARRASCO, ANA MARIA
Address: 1835 NW 112 AVE, SUITE 159
City-St-Zip: MIAMI, FL 33172

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: ASTRID PASCHALIDES

MISS

03/20/2007

Electronic Signature of Signing Officer or Director

Date