

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001226

Entity Name: A.A. DOLPHIN FINANCING COMPANY

FILED  
Feb 14, 2007  
Secretary of State

## Current Principal Place of Business:

3900 HOLLYWOOD BLVD., STE. 303  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

3900 HOLLYWOOD BLVD  
SUITE 303  
HOLLYWOOD, FL 33021

## Current Mailing Address:

PO BOX 267  
HALLANDALE, FL 33008

## New Mailing Address:

FEI Number: 02-0536135

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EMANO, AHARON  
3900 HOLLYWOOD BLVD., STE. 303  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

EMANO, AHARON  
3900 HOLLYWOOD BLVD.  
SUITE 303  
HOLLYWOOD, FL 33021 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:

02/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: EMANO, AHARON  
Address: 2440 NORTHEAST 196TH STREET  
City-St-Zip: NORTH MIAM BEACH, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: EMANO, AHARON  
Address: PO BOX 267  
City-St-Zip: HALLANDALE, FL 33008

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: AHARON EMANO

PD

02/14/2007

Electronic Signature of Signing Officer or Director

Date