

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026381

Entity Name: AF HOLDINGS, INC.

FILED  
Feb 16, 2006  
Secretary of State

**Current Principal Place of Business:**

4839 S.W. 148TH AVE.  
SUITE 256  
DAVIE, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

4839 S.W. 148TH AVE.  
SUITE 256  
DAVIE, FL 33330

**New Mailing Address:**

FEI Number: 75-3036217      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FREEMAN, ARTURO  
19476 SW 68 ST  
PEMBROKE PINES, FL 33332      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:            FREEMAN, ARTURO  
Address:        19476 SW 68 ST  
City-St-Zip:    PEMBROKE PINES, FL 33332

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

Title:            PSD            (X) Change ( ) Addition  
Name:            FREEMAN, ARTURO  
Address:        19476 SW 68 ST  
City-St-Zip:    PEMBROKE PINES, 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: ARTURO FREEMAN

PSD

02/16/2006

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

\_\_\_\_\_ Date