2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054379

Entity Name: A + COMEDY TRAFFIC SCHOOL, INC.

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

23014 SANDALFOOT PLAZA DR. C/O EXCLUSIVE INSURANCE BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

23014 SANDALFOOT PLAZA DR.
C/O EXCLUSIVE INSURANCE
BOCA RATON, FL 33428 US

23014 SANDALFOOT PLAZA DR.
C/O EXCLUSIVE INSURANCE
BOCA RATON, FL 33428 US

FEI Number: 01-0697578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOORES, JON 23014 SANDALFOOT PLAZA DR. C/O EXCLUSIVE INSURANCE BOCA RATON, FL 33428 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: PRES (X) Change () Addition

 Name:
 MOORES, ANA
 Name:
 MOORES, JON E

 Address:
 23014 SANDALFOOT PLAZA DR
 Address:
 23014 SANDALFOOT PLAZA DR

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428 US

Title: PD (X) Delete Title: () Change () Addition

 Name:
 MOORES, JON
 Name:

 Address:
 23014 SANDALFOOT PLAZA DR
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:

Title: MNGR (X) Delete Title: () Change () Addition

 Name:
 PEREIRA, APARECIDA
 Name:

 Address:
 23014 SANDALFOOT PLZA DR
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JON MOORES PRES 02/11/2009