FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90223 041 ***150.00

FOR PROFIT CORPORATION
2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000067077

1. Entity Name

AALD ENTERPRISES, INC.

DO NOT WRITE IN THIS SPACE

11034559

2. Principal Place of Business	3. Mailing Address
6190 NW 32 Terrace	6190 NW 32 Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft. Lauderdale, FL	City & State: Ft. Lauderdale, FL
Zip: 33309 Country	Zip: 33309 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3048987

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Vettese, Andrew

Street Address (P.O. Box Number is Not Acceptable): 6190 NW 32nd Terrace

City: Ft. Lauderdale FL Zip Code: 33309

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________ DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST Vettese, Andrew 6190 NW 32nd Terrace Ft. Lauderdale, FL 33309	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] X 4-28-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE