## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2005 08:00 AM Secretary of State

DOCUMENT # P02000102780  1. Entity Name A+ BAR-B-Q, INC.					Seci	ctary or State	
Principal Place of Business Mailing Address 830 PALM DR. 830 PALM DR. ORLANDO, FL 32803  ORLANDO, FL 32803							
DO NOT WRITE IN THIS SPACE				01062005 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For O2-0644588 Not Applied be			
					5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent							
ORLANDO, FL 32803						RITE	
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  Signature, typed or printed name of registered ogen and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.				5.00 May Be ded to Fees	000000U	)344969 <del>  00017   023   159, 00</del>	
11TLE NAME STREET ADDRESS CITY ST-ZIP	OFFICERS AND DIRE  D BIERNAT, K. 830 PALM DR. ORLANDO, FL 32803	CTORS			י טט זטט זדע	-0-011 -063 -139#.00-	]
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·				÷.	÷	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		IN "	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS ( CITY-ST-ZIP							
	pertify that the information supplied with this f on this report or supplemental report is true a poration or the receiver or trustee empowere	and accurate and that my signals	nption stated in Se ure shall have the	ection 119.07(3)( same legal effect	i), Florida Statutes. I i it as if made under oa	further certify that the information ath; that I am an officer or director	_

04-25-05

Daytime Phone #