

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000104393

1. Entity Name
ANDREWS PLAZA INC



Principal Place of Business Mailing Address

1840 NW 93 TERRACE 1840 NW 93 TERRACE
 CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065

DO NOT WRITE IN THIS SPACE



03142006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
22-3874291 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

D'ARMETTA, ANTONINO
 1840 NW 93 TERRACE
 CORAL SPRINGS, FL 33065

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

000000470253
 03/28/06-80007-002 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P D'ARMETTA, ANTONINO 1840 NW 93 TERRACE CORAL SPRINGS, FL 33065
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Antonino D'Armetta* Date: **3/14/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #