

2004 FOR PROFIT CORPORATION ANNUAL REPORT

3/2

FILED
Apr 12, 2004 8:00 am
Secretary of State

03-25-2004 90032 014 ***150.00

DOCUMENT # P03000082653

1. Entity Name
AAA REALTY OF WESTON II, INC.



Principal Place of Business
1040 WESTON ROAD
SUITE 105
WESTON, FL 33326

Mailing Address
10000 STIRLING ROAD
SUITE 5
COOPER CITY, FL 33024

66410942



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

55-0841757

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BONFIGLIO, CHARLES J
10000 STIRLING ROAD
SUITE 5
COOPER CITY, FL 33024

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PST
BONFIGLIO, CHARLES J
10000 STIRLING ROAD, SUITE 5
COOPER CITY, FL 33024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles J. Bonfiglio
CHARLES J. BONFIGLIO

3-12-04

954 436-8108

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #