



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90249 028 ***150.00

DOCUMENT # P03000086082 1. Entity Name AA MANAGEMENT SERVICES CORPORATION					
Principal Place of Business 108 SE 8TH AVENUE SUITE 116 FORT LAUDERDALE, FL 33301				Mailing Address 108 SE 8TH AVENUE SUITE 116 FORT LAUDERDALE, FL 33301	
2. Principal Place of Business 1610 NE 7 Street <small>Suite, Apt. #, etc.</small>		3. Mailing Address 108 SE 8 Avenue <small>Suite, Apt. #, etc.</small> Suite 116			
City & State FORT LAUDERDALE, FL		City & State FORT LAUDERDALE, FL		4. FEI Number 20-0139809	
Zip 33304		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ANDERSON, HUGH ALEXANDER JR 108 SE 8TH AVENUE SUITE 116 FORT LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent 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  HUGH A. ANDERSON JR. 4/19/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P ANDERSON, HUGH ALEXANDER JR 108 SE 8TH AVENUE SUITE 116 FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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  **HUGH A. ANDERSON JR.** **4/19/05**

TEL. 954 767 0079