


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000092863</b>	
1. Entity Name A.B. FIRESTOP SYSTEMS, INC.	

Principal Place of Business 8401 N BAYSHORE DRIVE MIAMI, FL 33138	Mailing Address 8401 N BAYSHORE DRIVE MIAMI, FL 33138
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**DO NOT WRITE IN THIS SPACE**



01042007. No Chg-P CR2E034 (11/05)

4. FEI Number 20-0177312	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  AZPIRI, GEORGE A 8401 N BAYSHORE DRIVE MIAMI, FL 33138	<b>DO NOT WRITE IN THIS SPACE</b>
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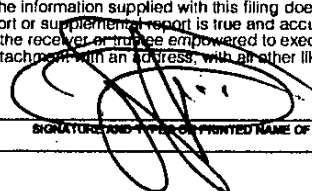
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		<p>U000000594627 01/23/07-800006-018 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AZPIRI, GEORGE A 8401 N BAYSHORE DRIVE MIAMI, FL 33138	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD AZPIRI, WILDEMIR 3604 NW 100 ST MIAMI, FL 33147	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD AZPIRI, ASLAM 8401 N BAYSHORE DRIVE MIAMI, FL 33138	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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 another like empowered.

**SIGNATURE:**  **GEORGE Azpieri (PD)** 1/15/2007 (305) 297-0071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #