

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90396 006 ***150.00

DOCUMENT # P03000101530

1. Entity Name
A2B ENTERPRISES INC.



Principal Place of Business
9841 ARBOR OAKS LANE
APT. # 303
BOCA RATON, FL 33428 US

Mailing Address
9841 ARBOR OAKS LANE
APT. # 303
BOCA RATON, FL 33428 US

50038895



2. Principal Place of Business
9812 SPANISH ISLES DR
Suite, Apt. #, etc.

3. Mailing Address
9812 SPANISH ISLE DR
Suite, Apt. #, etc.

03222005 Chg-P CR2E034 (10/03)

City & State
BOCA RATON FL
Zip 33496 Country US

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BOCA RATON FL
Zip 33496 Country US

4. FEI Number
36-4539564
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
BOBBA, ANTHONY S
9841 ARBOR OAKS LANE
APT. # 303
BOCA RATON, FL 33428

7. Name and Address of New Registered Agent
Name BOBBA ANTHONY S
Street Address (P.O. Box Number is Not Acceptable)
9812 SPANISH ISLES DR
City BOCA RATON FL Zip 33496

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 *Anthony S Bobba*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> Delete
NAME	BOBBA, ANTHONY S	
STREET ADDRESS	9841 ARBOR OAKS LANE APT. # 303	
CITY-ST-ZIP	BOCA RATON, FL 33428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOBBA ANTHONY S	
STREET ADDRESS	9812 SPANISH ISLES DR	
CITY-ST-ZIP	BOCA RATON FL 33496-1830	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Anthony S Bobba*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #