## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000057658

Entity Name: A & A HOME DEDAID AND DEMODELING INC

FILED Oct 18, 2005 Secretary of State

Elluty Nai	ille: A&An	DIVIE REPAIR AND REIVIODELI	ING, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
707 NUTW NICEVILLE	1EG AVE. E, FL 32578				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
707 NUTW NICEVILLE	1EG AVE. E, FL 32578				
FEI Number:	: 56-2457102	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and A				Address of New Registered Agent:	
SMITH, PA 1219 AIRP DESTIN, F	ORT RD STE	311 S			
	named entity e of Florida.	submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( REEVES, AAR 707 NUTMEG NICEVILLE, FI	AVE.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

City-St-Zip: NICEVILLE, FL 32578

() Delete

Name: Address: City-St-Zip: Title: ( ) Change (X) Addition REEVES, SHANNON A Name:

Address: 707 NUTMEG AVE City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON REEVES 10/18/2005