

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063419

Entity Name: A PLUS A INC.

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

22212 BOCA RANCHO DRIVE, APT C
BOCA RATON, FL 334284316

New Principal Place of Business:

Current Mailing Address:

10013 WINDING LAKE ROAD #207
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 90-0241086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABDALA, ABDEL
10013 WINDING LAKE ROAD #207
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABDALA, ABDEL
Address: 10013 WINDING LAKE ROAD #207
City-St-Zip: SUNRISE, FL 33351

Title: V () Delete
Name: AMIRA, ABDEL
Address: 10013 WINDING LAKE ROAD #207
City-St-Zip: SUNRISE, FL 33351

Title: TS () Delete
Name: ABDALA, ABDEL
Address: 10013 WINDING LAKE ROAD #207
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ABDALA, ABDEL
Address: 1210 NW 13 ST # 208 B
City-St-Zip: BOCA RATON, FL 33486

Title: V (X) Change () Addition
Name: ABDALA, ABDEL
Address: 1210 NW 13 ST # 208 B
City-St-Zip: BOCA RATON, FL 33486

Title: TS (X) Change () Addition
Name: ABDALA, ABDEL
Address: 1210 NW 13 ST # 208 B
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ABDEL ABDALA

PD

02/27/2007

Electronic Signature of Signing Officer or Director

Date