

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080069

Entity Name: A & P EXECUTIVA, CORP.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

9999 SUMMERBREEZE DR.
1106
SUNRISE, FL 33322 US

New Principal Place of Business:

1649 LAUDREDALE MANOR DR.
FORT LAUDERDALE, FL 33311 US

Current Mailing Address:

9999 SUMMERBREEZE DR.
1106
SUNRISE, FL 33322 US

New Mailing Address:

1649 LAUDERDALE MANOR DR.
FORT LAUDERDALE, FL 33311 US

FEI Number: 20-1137455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DA SILVA, PAULA
9999 SUMMERPREZZE DR.
1106
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

DA SILVA, PAULA
1649 LAUDERDALE MANOR DR.
FORT LAUDERDALE, FL 33311 US

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: PAULA DA SILVA

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVP () Delete
Name: DA SILVA, PAULA
Address: 9999 SUMMERPREZZE DR. #1106
City-St-Zip: SUNRISE, FL 33322 US

Title: S () Delete
Name: MONTEIRO SOARES, ANDERSON LUIS
Address: 9999 SUMMERPREZZE DR. #1106
City-St-Zip: SUNRISE, FL 33322 US

Title: T (X) Delete
Name: MONTEIRO, RICARDO
Address: 9999 SUMMERBREEZE DR. #1106
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP (X) Change () Addition
Name: DA SILVA, PAULA
Address: 1649 LAUDERDALE MANOR DR.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: S (X) Change () Addition
Name: MONTEIRO SOARES, ANDERSON LUIS
Address: 1649 LAUDERDALE MANOR DR.
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAULA DA SILVA

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date