2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000053375

Entity Name: AAA AMERICAN REALTY CORP.

FILED Mar 29, 2007 Secretary of State

Entity Na	me: AAA AME	ERICAN REALTY CORP.					
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
8TH FLOC	DREWS AVEN DR JDERDALE, F						
Current N	lailing Addres	ss:	New Maili	New Mailing Address:			
	DERAL HIGHV ALE BEACH, I						
FEI Number	: 81-0668582	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status	Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:				
SUITE 406	ALLANDALE BI	EACH BOULEVARD FL 33009 US	500 N FED	AZADI, DORA M 500 N FEDERAL HWY HALLANDALE BEACH, FL 33009 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing	its registere	d office or registered a	agent, or both,	
SIGNATUI	RE: DORA AZ	ZADI		03/29/2007			
	Electron	nic Signature of Registered Ag	ent		Date		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	AZADI, ARMAN 500 N FEDERA		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	SMITH, STUAR 1250 E HALLAI) Delete T M NDALE BEACH SUITE 406 BEACH, FL 33009	Title: Name: Address: City-St-Zip:	DVP AZADI, DOF 500 N FEDE HALLANDAI			
Title: Name: Address: City-St-Zip:	VARON, ELI 200 S. ANDRE) Delete WS AVENUE / 8TH FLOOR DALE, FL 33301	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	AZADI, DORA 500 N. FEDER) Delete AL HIGHWAY BEACH, FL 33009	Title: Name: Address: City-St-Zip:		() Change () Addition		

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: DORA M AZADI DSEC 03/29/2007