2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2007 08:00 AM Secretary of State

	DOCL	IN	AEN.	JT	#	P ₀₅	ገበ	በበ	176	33	RF	ì
ı	ハハハ	Jľ		V I	*	ロいい		υu	,,,	,,,	u	3

1. Entity Name A & E WAREHOUSING GROUP, CORP



Principal Place of Business

Mailing Address

9383-9385 NW 13TH ST MIAMI, FL 33172

9383-9385 NW 13TH ST MIAMI, FL 33172



DO NOT WRITE IN THIS SPACE

01162007 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number Not Applicable 20-2912426

5. Certificate of Status Desired

\$8.75 Additional

(305) 4H -9452

Daytime Phone #

6. Name and Address of Current Registered Agent

PENALVER, ANDRES E 10830 NW 72TH ST MIAMI, FL 33178

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title	facolicable. (NOTÉ: Recu	stered Agent signatur	d Agent signature required when reinstaling) DATE						
organica, types or parametriza o registrato digent and use il approxima. (IVO) L. registrato registrato registrato registrato registrato resistancy.										
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees								
10.	OFFICERS AND DIREC	TORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PENALVER, ANDRES E 10830 NW 72TH ST MIAMI, FL 33178				U00000634134 02/21/07-80093-010 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NUCETE, EDUARDO 5136 NW 112TH CT MIAMI, FL 33178									
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE					
TITLE NAME STREET ADDRESS CITY-SI-ZIP										
TITLE NAME STREET ADDRESS CITY-SI-ZIP										
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attactifying with areaddress, with all other like empowered.										

ANDRES E. PENALVER

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR