

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087685

FILED
Feb 25, 2006
Secretary of State

Entity Name: A & D PERSONAL PROTECTION, INC

Current Principal Place of Business:

5424 NW 199 TERR
OPA-LOCKA, FL 33055

New Principal Place of Business:

5424 NW 199 TERR
OPA-LOCKA, FL 33055 US

Current Mailing Address:

5424 NW 199 TERR
OPA-LOCKA, FL 33055

New Mailing Address:

5424 NW 199 TERR
OPA-LOCKA, FL 33055 US

FEI Number: 20-3038833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AVILA, ORLANDO
5424 NW 199 TERR
OPA-LOCKA, FL 33055 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: AVILA, FLORENCE D
Address: 5424 NW 199 TERR
City-St-Zip: OPA-LOCKA, FL 33055

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AVILA, FLORENCE D
Address: 5424 NW 199 TERR
City-St-Zip: OPA-LOCKA, FL 33055

Title: VP () Change (X) Addition
Name: DURAN, BRUNO S
Address: 5424 NW 199 TERR
City-St-Zip: OPA-LOCKA, FL 33055

Title: DIR () Change (X) Addition
Name: AVILA, ORLANDO
Address: 5424 NW 199 TERR
City-St-Zip: OPA-LOCKA, FL 33055

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: ORLANDO AVILA

DIR

02/25/2006

Electronic Signature of Signing Officer or Director

Date