




**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000097457 1. Entity Name A & S FLORIDA ENTERPRISES, INC.			
Principal Place of Business 1922 NE 18TH STREET CAPE CORAL, FL 33909 US		Mailing Address 1318 LAFAYETTE STREET CAPE CORAL, FL 33904 US	
DO NOT WRITE IN THIS SPACE			
		03042008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 20-4128865	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HILL, THOMAS W CPA 1318 LAFAYETTE STREET CAPE CORAL, FL 33904		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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____			
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HOFFMAN, AXEL POTTHOEFEREI 43 DORTMUND, GE 44388		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HOFFMAN, SYBILLE POTTHOEFEREI 43 DORTMUND, GE 44388		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - 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 of 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 attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 03/11/2008 Daytime Phone: 239-549-2444	