

## **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000114049

Entity Name: S & R SONS ENTERPRISES, INC.

**FILED**  
**Nov 10, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

1323 NW 102ND WAY  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

1419 NE 25TH AVENUE  
OCALA, FL 34470 US

**Current Mailing Address:**

1323 NW 102ND WAY  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

1419 NE 25TH AVENUE  
OCALA, FL 34470 US

FEI Number: 16-1733391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEERAZ, ALI  
1323 NW 102ND WAY  
CORAL SPRINGS, FL 33071 US

**Name and Address of New Registered Agent:**

SHEERAZ, ALI  
1419 NE 25TH AVENUE  
OCALA, FL 34470 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: ALI SHEERAZ

11/10/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHERRAZ, ALI  
Address: 1323 NW 102ND WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPTS (X) Change ( ) Addition  
Name: SHEERAZ, ALI  
Address: 1419 NE 25TH AVENUE  
City-St-Zip: OCALA, FL 34470 US

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: ALI SHEERAZ

DPTS

11/10/2006

Electronic Signature of Signing Officer or Director

Date