

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133470

FILED
Feb 25, 2006
Secretary of State

Entity Name: A & R ENTERPRISES OF THE TREASURE COAST, INC

Current Principal Place of Business:

2394 SW FERN CIRCLE
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

2421 AVE D
FORT PIERCE, FL 34950

Current Mailing Address:

2394 SW FERN CIRCLE
PORT SAINT LUCIE, FL 34953

New Mailing Address:

2421 AVE D
FORT PIERCE, FL 34950

FEI Number: 65-1494125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABDALLAH, RIAD M
2394 SW FERN CIRCLE
PORT SAINT LUCIE, FL 34953 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: D () Delete
Name: ABDEL-KADER, AMEEN
Address: P O BOX 724
City-St-Zip: INDIANTOWN, FL 34956

Title: D () Delete
Name: ABDALLAH, RIAD
Address: 2394 SW FERN CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RIAD ABDALLAH

D

02/25/2006

Electronic Signature of Signing Officer or Director

Date