2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147730

Entity Name: AH SALES, INC.

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14026 NW 82ND AVE 4525 EAST 11TH AVE MIAMI LAKES, FL 33016 HIALEAH, FL 33013

Current Mailing Address: New Mailing Address:

14026 NW 82ND AVE 4525 EAST 11TH AVE MIAMI LAKES, FL 33016 HIALEAH, FL 33013

FEI Number: 20-3735264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ONDE, CARMEN A
14026 NW 82ND AVE
MIAMI LAKES, FL 33016 US

ONDE, CARMEN A
4525 EAST 11TH AVE
HIALEAH, FL 33013 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: CARMEN ONDE 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ONDE, CARMEN A
 Name:
 ONDE, CARMEN A

 Address:
 14026 NW 82ND AVE
 Address:
 4525 EAST 11TH AVE

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 HIALEAH, FL 33013

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ONDE, CARMEN A
 Name:
 ONDE, CARMEN A

 Address:
 14026 NW 82ND AVE
 Address:
 4525 EAST 11TH AVE

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 HIALEAH, FL 33013

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 FAGAN, ROBERTA
 Name:
 FAGAN, ROBERTA

 Address:
 14026 NW 82 ND AVE
 Address:
 4525 EAST 11TH AVE

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 HIALEAH, FL 33013

Title: T () Delete Title: T (X) Change () Addition

 Name:
 FAGAN, ROBERTA
 Name:
 FAGAN, ROBERTA

 Address:
 14026 NW 82 AVE
 Address:
 4525 EAST 11TH AVE

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 HIALEAH, FL 33013

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: ROBERTA FAGAN MS 04/18/2007