2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104727

Title:

Name:

Address:

City-St-Zip:

FILED Feb 04, 2008 Secretary of State

Entity Name: AN ADAM'S MAN ORGANIZATION, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
2470 NW 1 MIAMI, FL 3					
Current Mailing Address:			New Mailing Address:		
2470 NW 1 MIAMI, FL 3					
FEI Number:	20-5361712	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
THOMPSOI 2495 NW 1 MIAMI, FL 3					
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.					
SIGNATUR	E:				
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E WALKER, FABIAI 2470 NW 111TH MIAMI, FL 33167	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () E MOXEY, VERNOI 8522 NW 14TH C MIAMI, FL 33147	T.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SECY () E ROQUE, RAUL 8211 NW 13TH A MIAMI, FL 33147		Title: Name: Address: City-St-Zip:	SECR (X) Change () Addition ROQUE, RAUL 8211 NW 13TH AVE MIAMI, FL 33147 US	
Title: Name: Address: City-St-Zip:	KNOWLES, WILL 201 SW 68TH WA		Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

TRES

THOMPSON, BRADLEY

2495 NW 111TH ST.

MIAMI, FL 33167 US

(X) Change () Addition

SIGNATURE: FABIAN WALKER P 02/04/2008

() Delete

THOMPSON, BRADLEY

2495 NW 111TH ST.

MIAMI, FL 33167 US