

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123812

FILED  
May 12, 2007  
Secretary of State

Entity Name: DOUBLE AA PERFORMANCE INC.

## Current Principal Place of Business:

452 4TH LANE SW  
VERO BEACH, FL 32962

## New Principal Place of Business:

1145 18TH AVE SW  
VERO BEACH, FL 32962

## Current Mailing Address:

452 4TH LANE SW  
VERO BEACH, FL 32962

## New Mailing Address:

1145 8TH AVE SW  
VERO BEACH, FL 32962

FEI Number: 20-5648607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEROSA, MICHAEL M  
452 4TH LANE SW  
VERO BEACH, FL 32962 US

## Name and Address of New Registered Agent:

DEROSA, MICHAEL M  
1145 8TH AVE SW  
VERO BEACH, FL 32962 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: MICHAEL M DEROSA

05/12/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MICHAEL, DEROSA M  
Address: 452 4TH LANE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: V ( ) Delete  
Name: ATTILIO, DEROSA G  
Address: 452 4TH LANE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: V ( ) Delete  
Name: DEROSA, CHERYL L  
Address: 452 4TH LANE SW  
City-St-Zip: VERO BEACH, FL 32962

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MICHAEL, DEROSA M  
Address: 1145 18TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: V (X) Change ( ) Addition  
Name: ATTILIO, DEROSA G  
Address: 1145 18TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: V (X) Change ( ) Addition  
Name: DEROSA, CHERYL L  
Address: 1145 18TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

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.

SIGNATURE: MICHAEL M DEROSA

P

05/12/2007

Electronic Signature of Signing Officer or Director

Date