

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000135842

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** AACTION TRANSMISSIONS, INC.

**Current Principal Place of Business:**

12045 NW 7 AVENUE  
NORTH MIAMI, FL 33168

**New Principal Place of Business:**

18920 W DIXIE HWY  
MIAMI, FL 33180

**Current Mailing Address:**

P.O. BOX 630322  
MIAMI, FL 331630322

**New Mailing Address:**

**FEI Number:** 20-5783862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEFANELLI, MICHELE CPA  
14411 COMMERCE WAY  
310  
MIAMI LAKES, FL 33016 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KAISER, STEVEN  
Address: 14411 COMMERCE WAY #310  
City-St-Zip: MIAMI LAKES, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: STEVEN KAISER

PRES

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date