

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2008 8:00 am
Secretary of State

02-08-2008 90033 036 ***150.00

DOCUMENT # P07000041953	
1. Entity Name AVAILABLE ASSEMBLERS INC.	

Principal Place of Business 10898 110TH AVENUE NORTH LARGO FL 33778 US	Mailing Address 10898 110TH AVENUE NORTH LARGO FL 33778 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/07)

4. FEI Number 20-8864336	☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent AVITABLE, ARMOND A 10898 110TH AVENUE NORTH LARGO FL 33778	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Armond A. Avitable* *[Signature]* *1/30/08*
Signature, typed or printed name of registered agent (must be a Florida resident) (NOTE: Registered Agent signature required when changing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PRES	NAME AVITABLE, CHRISTOPHER	☒ Delete	TITLE Secy.	NAME Avitable Christopher	☒ Change ☐ Addition
STREET ADDRESS 10898 110TH AVENUE NORTH	CITY-STATE-ZIP LARGO FL 33778		STREET ADDRESS 10898 110TH Ave North	CITY-STATE-ZIP LARGO FL.	
TITLE TRES	NAME AVITABLE, CHRISTINA	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS 10898 110TH AVENUE NORTH	CITY-STATE-ZIP LARGO FL 33778		STREET ADDRESS	CITY-STATE-ZIP	
TITLE SECT	NAME AVITABLE, ANTOINETTE	☒ Delete	TITLE PRESIDENT	NAME Avitable Antoinette	☒ Change ☐ Addition
STREET ADDRESS 10898 110TH AVENUE NORTH	CITY-STATE-ZIP LARGO FL 33778		STREET ADDRESS 10898 110TH Ave North	CITY-STATE-ZIP LARGO FL 33778	
TITLE DIR	NAME AVITABLE, ARMOND A	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS 10898 110TH AVENUE NORTH	CITY-STATE-ZIP LARGO FL 33778		STREET ADDRESS	CITY-STATE-ZIP	
TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS	CITY-STATE-ZIP		STREET ADDRESS	CITY-STATE-ZIP	
TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS	CITY-STATE-ZIP		STREET ADDRESS	CITY-STATE-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Armond A. Avitable* *1/30/08* *7274341466*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE TELEPHONE NUMBER