2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000056764

City-St-Zip:

MIAMI, FL 33167

Entity Name: AAA PLUS MAINTENANCE SERVICES, INC

FILED Aug 03, 2009 Secretary of State

Entity Name: AAA PLUS MAINTENANCE SERVICES, INC					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1175 NE 125TH STREET 203 N MIAMI, FL 33161 US			12875 NE 14TH AVEN N MIAMI, FL 33161	12875 NE 14TH AVENUE N MIAMI, FL 33161 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1175 NE 125TH STREET 203 N MIAMI, FL 33161 US		12875 NE 14TH AVEN N MIAMI, FL 33161	12875 NE 14TH AVENUE N MIAMI, FL 33161 US		
FEI Number:	26-0140370	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PAUL, FRANTZ 6308 SW 22ND COURT HOLLYWOOD, FL 33023 US			11900 BISCAYNE BL\ 288	REMER & GEORGES-PIERRE, P.A 11900 BISCAYNE BLVD 288 NORTH MIAMI, FL 33181 US	
The above in the State		ubmits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: FRANTZ PAUL				08/03/2009	
Electronic Signature of Registered Agent			t	Date	
		3(2)(b), F.S., the corporation did not a Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () FRANTZ, PAUL 6308 SW 22ND HOLLYWOOD, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OFF () PARAISON, JEA 5901 MANCHES TAMARAC, FL	STER WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	OFF (X) ST FLEUR, LUC 1450 NW 138TH		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: FRANTZ PAUL P 08/03/2009