## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 27, 2005 8:00 am Secretary of State 04-27-2005 90329 043 \*\*\*150.00 **DOCUMENT # P33029** 1. Entity Name A-1 PRODUCTS, INC. 14000958 Principal Place of Business Mailing Address 2020 AVENUE F, ENSLEY 2020 AVENUE F, ENSLEY BIRMINGHAM, AL 35218 BIRMINGHAM, AL 35218 US US No Chg-P CR2E034 (10/03) 01112005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numbe 63-0575521 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NIFTY CLEANERS DO NOT WRITE 4422 MARKET ST MARIANNA, FL 32446 IN THIS SPACE 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. Signature, typed or present usone of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. CP TITLE ATWATER, CHARLES F., JR. NAME STREET ADDRESS 5447 DOVER CLIFF CIRCLE CITY-ST-ZIP BIRMINGHAM, AL 35242 VCV TITLE ATWATER, SANDRA B. NAME STREET ADDRESS 5447 DOVER CLIFF CIRCLE CITY-ST-ZP BIRMINGHAM, AL 35242 2721 DRENNEN CIR. BIRMINGHAM, AL 35242 TITLE ATWATER, ALEX R NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 of 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 chapter 607 and attachment with an address, with all other like empowered.

**SIGNATURE** 

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/2

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

205-787-1403

FILED