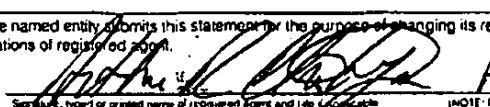
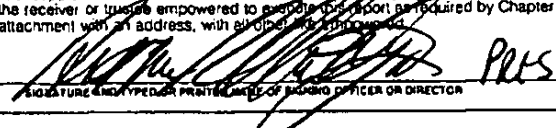


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

05-05-2006 90190 038 ***150.00

P93000059304
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUN 19 PH 3:46

DOCUMENT # P93000059304					
1. Entity Name A & N SALES, INC.					
Principal Place of Business 4901 C RIO VISTA AVE TAMPA FL 33634 US			Mailing Address 4901 C RIO VISTA AVE TAMPA FL 33634 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3199934	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent CHRISTY, ARTHUR R III 4901 C RIO VISTA AVE TAMPA FL 33634				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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  PRES. 4/17/06 (Signature, typed or printed name of registered agent and fee to be paid) (NOTE: Registered Agent's signature required when non-resident) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHRISTY, NANCY R 7001 PAT BLVD. TAMPA-FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTY, ARTHUR R III 7001 PAT BLVD TAMPA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CHRISTY, JEFFREY ARTHUR 7001 PAT BLVD TAMPA FL 33615	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CHRISTY, JEFFREY ARTHUR 6253 DUCK KEY CT. TAMPA, FL 33625	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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 information.					
SIGNATURE:  PRES. 6/9/06 (Signature and typed name of filing officer or director) Date Daytime Phone #					