

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000101851

FILED
Mar 08, 2005
Secretary of State

Entity Name: AT&A ENTERPRISES INC.

Current Principal Place of Business:

8242 STATE RD 84
DAVIE, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

8242 STATE RD 84
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 65-0718198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSINA, ANDRES R JR
8242 STATE RD 84
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

ALSINA, ANDRES R JR
10 GABLES BOULEVARD
FORT LAUDERDALE, FL 33326 US

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: ANDRES R. ALSINA

03/08/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALSINA, ANDRES R JR
Address: 10 GABLES BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: V () Delete
Name: REYES, ANTHONY
Address: 1463 SW 97 LANE
City-St-Zip: DAVIE, FL 33324

Title: ST () Delete
Name: REYES, ANA M
Address: 1463 SW 97 LANE
City-St-Zip: DAVIE, FL 33324

Title: V () Delete
Name: ALSINA, REGINA
Address: 10 GABLES BLVD
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: V () Delete
Name: ALSINA, ANDRES R
Address: 3611 WASHINGTON LANE
City-St-Zip: HOLLYWOOD, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RORY, GAMBOA
Address: 1177 N.W. 125 PLACE
City-St-Zip: MAIMI, FL 33182

Title: V (X) Change () Addition
Name: ANDRES, ALSINA
Address: 10 GABLES BLVD
City-St-Zip: FT. LAUDERDALE, FL 33326

Title: ST (X) Change () Addition
Name: MENDOZA, WINSTON
Address: 8242 STATE ROAD #84
City-St-Zip: DAVIE, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: ANDRES R. ALSINA

V

03/08/2005

Electronic Signature of Signing Officer or Director

Date