

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101851

FILED  
Mar 27, 2006  
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  
10 GABLES BOULEVARD  
FORT LAUDERDALE, FL 33326 US

## Name and Address of New Registered Agent:

ALSINA, ANDRES  
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 ALSINA

03/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: ALSINA, ANDRES  
Address: 10 GABLES BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33326

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

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

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 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.

SIGNATURE: ANDRES ALSINA

P/D

03/27/2006

Electronic Signature of Signing Officer or Director

Date