


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90053 011 ***150.00

DOCUMENT # P99000022888 1. Entity Name A.A.AUTOTRAFFIC SCHOOL, INC.	
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Principal Place of Business 7305 W. FLAGLER STREET MIAMI, FL 33134	Mailing Address 7305 W. FLAGLER STREET MIAMI, FL 33134
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DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0908458	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

COLMENERO, ESPERANZA J
4380 SW 5TH STREET
MIAMI, FL 33134

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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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	COLMENERO, REYNALDO
STREET ADDRESS	4380 SW 5 ST.
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	S
NAME	COLMENERO, JOSE
STREET ADDRESS	4380 SW 2 ST.
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	T
NAME	COLMENERO, ESPERANZA J
STREET ADDRESS	4380 SW 5 ST.
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	SECRETARY
NAME	COLMENERO, ESPERANZA J
STREET ADDRESS	4380 SW 5TH STREET
CITY-ST-ZIP	MIAMI, FL 33134-1945
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: Reynaldo Colmenero **2/14/07** **305-476-0101**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #