

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthland  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **J76552 (5)**  
1. Corporation Name  
**A1A CONCEPTS, INC.**



Principal Place of Business Mailing Address  
**1970 MICHIGAN AVE BLDG B-1 COCOA FL 32922 US**

2. Principal Place of Business 2a. Mailing Address  
**21 A1A CONCEPTS 26 A1A CONCEPTS**  
**22 1941 MICHIGAN AVENUE 27 1941 MICHIGAN AVENUE**  
**23 COCOA, FL 32922 28 COCOA, FL 32922**  
**24 29 Brevard 30 Brevard**

3. Date Incorporated or Qualified **06/05/1987** 3a. Date of Last Report **01/13/1995**  
4. FEI Number **59-2816075** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**JOHNS, REGIS A.**  
**1970 MICHIGAN AVE**  
**BLDG B-1**  
**COCOA FL 32922**

10. Name and Address of New Registered Agent  
**81 Name: Johns, Regis A**  
**82 Street Address (P.O. Box Number is Not Acceptable): 1941 Michigan Ave**  
**83**  
**84 City: Cocoa FL 85 Zip Code: 32922**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE (Print name, title, and address of the person signing) (Date)

12. OFFICERS AND DIRECTORS  
1. TITLE: PD  
NAME: **JOHNS, STEPHEN**  
STREET ADDRESS: **3805 ARROWSMITH COCOA FL**  
CITY, ST, ZIP: **STD**  DELETE  
NAME: **JOHNS, REGIS**  
STREET ADDRESS: **822 CARDINAL ROAD COCOA FL**  
CITY, ST, ZIP:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY, ST, ZIP:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY, ST, ZIP:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY, ST, ZIP:  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1. TITLE:  Change  Addition  
2. NAME:  Change  Addition  
3. STREET ADDRESS:  Change  Addition  
4. CITY, ST, ZIP:  Change  Addition  
5. TITLE:  Change  Addition  
6. NAME:  Change  Addition  
7. STREET ADDRESS:  Change  Addition  
8. CITY, ST, ZIP:  Change  Addition  
9. TITLE:  Change  Addition  
10. NAME:  Change  Addition  
11. STREET ADDRESS:  Change  Addition  
12. CITY, ST, ZIP:  Change  Addition

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE: *Regis A Johns* **Regis A Johns** 2/3/96 (407)632-4292

CR2E034 (12/95)