2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 25, 2007 08:00 A Secretary of State **DOCUMENT # P00000041826** 1. Entity Name A-1 AGENTS, INC. Principal Place of Business Mailing Address 721 IMAR DRIVE 721 IMAR DRIVE SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573 01172007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3660957 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NEUKAMM, JOHN B DO NOT WRITE 305 SOUTH BLVD TAMPA, FL 33606 IN THIS SPACE 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U000000731085 Trust Fund Contribution. Added to Fees 05/08/07-80103-025 150.00 10. OFFICERS AND DIRECTORS TITLE NAME CONNOLLY, MARGARET STREET ADDRESS 721 IMAR DR CITY-ST-ZIP SUN CITY CENTER, FL 33573 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT) F NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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.

FICER OR DIRECTOR

TYPED OR PRINTED NAME OF SIGNING

Daytime Phone #