


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90206 001 ***300.00

DOCUMENT # P01000017417	
1. Entity Name A1 & COMPANY, INC.	

Principal Place of Business 2450 SW 137TH AVE SUITE 234 MIAMI, FL 33175	Mailing Address 2450 SW 137TH AVE SUITE 234 MIAMI, FL 33175
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DO NOT WRITE IN THIS SPACE



04292005	No Chg-P	CR2E034 (10/03)
4. FEI Number 65-1094140	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LOPEZ, PETER M ESQ
2450 SW 137TH AVE
SUITE 234
MIAMI, FL 33125

**DO NOT WRITE
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALBANO, DOMENICO 540 BRICKELL KEY DR # 1213 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *James J. ...* Director Date: 4/28/05 Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR