

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 610206

FILED
Feb 24, 2012
Secretary of State

Entity Name: ALL LINES INSURANCE AGENCY, INC.

Current Principal Place of Business:

4828 BLANDING BLVD.
SUITE 1
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7339
JACKSONVILLE, FL 32238 US

New Mailing Address:

FEI Number: 59-1878884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARHAT, OMAR
4828 BLANDING BLVD
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FARHAT, OMAR
Address: 4828 BLANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: FARHAT, JANAN
Address: 4828 BLANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: OMAR S FARHAT

PRES

02/24/2012

Electronic Signature of Signing Officer or Director

Date