

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130267

FILED
May 03, 2004
Secretary of State

Entity Name: ALL SERVICES AND BEST SOLUTIONS, INC.

Current Principal Place of Business:

3801 NE 15TH AVENUE
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

3801 NE 15TH AVENUE
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 03-0502018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANG, DARICE M
3801 NE 15TH AVENUE
OAKLAND PARK, FL 33334

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GELLONA, ANTONIO
Address: 2125 NE 25TH STREET
City-St-Zip: WILTON MANORS, FL 33305

Title: V () Delete
Name: HERRERA, FELIPE
Address: 2125 NE 25TH STREET
City-St-Zip: WILTON MANORS, FL 33305

Title: ST () Delete
Name: LANG, DARICE M
Address: 3801 NE 15TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DARICE M. LANG

ST

05/03/2004

Electronic Signature of Signing Officer or Director

_____ Date