2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120040

Entity Name: ALL PRO REALTY, INC.

FILED Mar 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9470 TANGERINEPL. # 201 9470 TANGERINEPL. # 201

FT. LAUDERDALE, FL 33324 DAVIE, FL 33324

Current Mailing Address: New Mailing Address:

9470 TANGERINEPL. # 201 9470 TANGERINEPL. # 201

FT. LAUDERDALE, FL 33324 DAVIE, FL 33324

FEI Number: 20-5844963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ORTIZ, DARLENE 9470 TANGERINEPL. # 201 9470 TANGERINEPL. # 201

FT. LAUDERDALE, FL 33324 US DAVIE, FL 33324 US

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: DARLENE F. ORTIZ 03/05/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ORTIZ, DARLENE
 Name:
 ORTIZ, DARLENE

 Address:
 9470 TANGERINEPL. # 201
 Address:
 9470 TANGERINEPL. # 201

Address: 9470 TANGERINEPL: # 201 Address: 9470 TANGERINEPL: # 2
City-St-Zip: FT. LAUDERDALE, FL 33324 City-St-Zip: DAVIE, FL 33324

Title: T () Delete Title: T (X) Change () Addition

Name: KACZYNSKI, BOLESLAW
Address: 9470 TANGERINEPL. # 201

Name: KACZYNSKI, BOLESLAW
Address: 9470 TANGERINEPL. # 201

Address: 9470 TANGERINEPL. # 201

City-St-Zip: FT. LAUDERDALE, FL 33324 City-St-Zip: DAVIE, FL 33324

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

Name: KACZYNSKI, FLORENCE Name: KACZYNSKI, FLORENCE
Address: 9470 TANGERINEPL. # 201 Address: 9470 TANGERINEPL. # 201

City-St-Zip: FT. LAUDERDALE, FL 33324 City-St-Zip: DAVIE, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DARLENE F. ORTIZ P 03/05/2008