

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000026896

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** ALL STORES MANAGEMENT & MONITORING, INC.

**Current Principal Place of Business:**

9170 WEST STATE ROAD 84  
DAVIE, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

9170 WEST STATE ROAD 84  
DAVIE, FL 33324 US

**New Mailing Address:**

FEI Number: 27-2274757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LYON, JAMES B ESQ.  
3300 UNIVERSITY DRIVE  
SUITE 802  
CORAL SPRINGS, FL 33065 US

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

MOGHADDOM, MEHRDAD F  
9170 W SR 84  
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: MFALLAH

04/12/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: ZAHEDI, MAHNAZ  
Address: 9170 WEST STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

Title: S/T  
Name: MOGHADDAM, MEHRDAD F  
Address: 9170 WEST STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

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: MFALLAH

PRE

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date