

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 3:50

DOCUMENT # **P93000037298 (5)**

1. Corporation Name

ALL STAGING UNLIMITED, INC.

Principal Place of Business

Mailing Address

1140 SO RIO GRANDE AVE
ORLANDO FL 32805
US

2458 SHERBROOKE RD
WINTER PARK FL 32792
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/21/1993** 3a. Date of Last Report **03/29/1994**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-3190036

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

A.G.C. CO.
200 S. ORANGE AVE.
SUITE 2300
ORLANDO FL 32801-3432

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of present (new) registered agent and fee if applicable)

(Signature of Registered Agent (signature required when registering))

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **SMITH, JANET C**
STREET ADDRESS **2458 SHERBROOKE RD**
CITY ST ZIP **WINTER PARK FL**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

TITLE **D**
NAME **SMITH, DENNIS**
STREET ADDRESS **2458 SHERBROOKE RD**
CITY ST ZIP **WINTER PARK FL**

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(9)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 on Block 1, or Block 1a if changed, or on an attachment with an address.

SIGNATURE:

Janet C. Smith

JANET C. SMITH 1/12/95

(407) 422-4387

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE (Required if Fee is \$)