

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047721

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** A-ALL PORPOISE SERVICES, INC.

**Current Principal Place of Business:**

441 SE 6TH AVENUE  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

7777 GLADES ROAD  
SUITE 209  
BOCA RATON, FL 33434

**New Mailing Address:**

**FEI Number:** 65-0677602      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MAHONEY, ROBERT F. CPA  
7777 GLADES ROAD  
SUITE 209  
BOCA RATON, FL 33434 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: P  
Name: WILDE, JOHN O II  
Address: 441 SE 6TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

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: JOHN O WILDE II

P

04/28/2011

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

\_\_\_\_\_ Date