

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000007121

**Entity Name:** ALL ESTATE ITEMS & U, INC.

**Current Principal Place of Business:**

16319 E PIMLICO DR  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

16319 E PIMLICO DR  
LOXAHATCHEE, FL 33470 UN

**FEI Number: 88-2943163**

**Certificate of Status Desired: No**

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

ROBERTS, JESSIE E  
16319 E PIMLICO DR  
LOXAHATCHEE, FL 33470 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ROBERTS, JESSIE E  
Address 16319 E PIMLICO DR  
City-State-Zip: LOXAHATCHEE FL 33470

Title MBR  
Name MENDOZA, NAPOLEON  
Address 16319 E PIMLICO DR  
City-State-Zip: LOXAHATCHEE FL 33470

Title VP  
Name ROBERTS, ADILIA  
Address 16319 E PIMLICO DR  
City-State-Zip: LOXAHATCHEE FL 33470

Title MBR  
Name MENDOZA, RAMONA  
Address 16319 E PIMLICO DR  
City-State-Zip: LOXAHATCHEE FL 33470

Title MBR  
Name ROBERTS, SUSAN  
Address 16319 E PIMLICO DR  
City-State-Zip: LOXAHATCHEE FL 33470

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ADILIA ROBERTS**

**VP**

**04/13/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date