

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 373071

**Entity Name:** ALL-AMERICAN MOBILE HOMES, INC.

**Current Principal Place of Business:**

4990 SW 52 ST.  
SUITE 201  
DAVIE, FL 33314

**Current Mailing Address:**

4990 SW 52 ST.  
SUITE 201  
DAVIE, FL 33314

**FEI Number:** 59-1316441

**Certificate of Status Desired:** No

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

ROWARS, CHARLES M  
4990 SW 52 ST.  
SUITE 201  
DAVIE, FL 33314 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 PD  
Name ROWARS, CHARLES M  
Address 4990 SW 52 ST., STE. 201  
City-State-Zip: DAVIE FL 33314

Title DS  
Name ROWARS, BARRY J  
Address 4990 SW 52 ST., STE. 201  
City-State-Zip: DAVIE FL 33314

Title T  
Name ROWARS, CHARLES M  
Address 4990 SW 52 ST., STE. 201  
City-State-Zip: DAVIE FL 33314

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:** CHARLES ROWARS

PD

01/12/2017

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

\_\_\_\_\_  
Date