# DOCUMENT# P10000041940

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT** 

Entity Name: ALL ITALIAN CONSTRUCTION INC

## **Current Principal Place of Business:**

4500 BAYMEADOWS RD APT 224 JACKSONVILLE, FL 32217

## **Current Mailing Address:**

4500 BAYMEADOWS RD APT 224 JACKSONVILLE, FL 32217

### FEI Number: 27-2618817

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

GJECAJ, JAKIN 4500 BAYMEADOWS RD APT 224 JACKSONVILLE, FL 32217 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:      | : JAKIN GJECAJ                           |                 |                           | 01/18/2020 |
|-----------------|--|-----------------|---------------------------|------------|
|                 | Electronic Signature of Registered Agent |                 |                           | Date       |
| Officer/Direc   | tor Detail :                             |                 |                           |            |
| Title           | PSTD                                     | Title           | VP                        |            |
| Name            | GJECAJ, JAKIN                            | Name            | GJECAJ, MAJK COOWNER      |            |
| Address         | 4500 BAYMEADOWS RD APT 224               | Address         | 4500 BAYMEADOWS RD APT 22 | 4          |
| City-State-Zip: | JACKSONVILLE FL 32217                    | City-State-Zip: | JACKSONVILLE FL 32217     |            |
| Title           | D  |                 |                           |            |
| Name            | GJECAJ, FABJAN                           |                 |                           |            |
| Address         | 4500 BAYMEADOWS RD APT 224               |                 |                           |            |
| City-State-Zip: | JACKSONVILLE FL 32217                    |                 |                           |            |
|                 |  |                 |                           |            |

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.

RA

## SIGNATURE: JAKIN GJECAJ

Electronic Signature of Signing Officer/Director Detail

FILED Jan 18, 2020 Secretary of State 7910933036CC

Certificate of Status Desired: No

01/18/2020 Date