

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049939

Entity Name: ALL IN ONE PROTECTION, INC.

Current Principal Place of Business:

462 PORT SAINT LUCIE BLVD
#133
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

462 SW PSL BLVD SUITE #133
PORT ST LUCIE, FL 34953

FEI Number: 27-2854106

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUINN, STACY
462 PORT SAINT LUCIE
133
PORT SAINT LUCIE, FL 34953 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 QUINN, STACY
Address 462 PORT SAINT LUCIE
133
City-State-Zip: PORT SAINT LUCIE FL 34953

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: STACY QUINN

PRESIDENT

03/25/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date