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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

625870

(1)

DO IT ALL, INC.

Edullina Addings

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2860 NW 187 ST. 2860 NW 187 ST.				r badiid qirea shada dhada gara sadii sadi dadii dhali dhasi dhasi dhasi dhasi dhali sadi		
MIAMI FL 33056 MIAMI FL 33056					DO NOT WRITE IN THIS SPACE	
						SPACE
					3. Date Incorporated or Qualified 06/01/1979	
—	Place of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26		59-1975341	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zιρ	Country	1	8. This corporation owes or has paid the cur	rent year Intangible
24	25		30		1.	☐ Yes ☐ No
	g, Name and Address of Curren	t Registered Agent		·	10. Name and Address of New Registered	Agent
Turner, A. A.			81	Name		
2860 N.W. 187 ST.			82	Street Add	fress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33056					, a contract to the contract of	
			83			
			84	City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050;	2 and 607.1508, Florida Statute	s, the abov	e-named cor.		changing its registered
office of r agent. La	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was a itions of, Section 607.0505, Flo	uthorized by rida Statute	y the corpora s.	poration submits this statement for the purpose o tion's board of directors. I hereby accept the app	cointment as registered
SIGNATURE				•		
	Signature, typod or printed name of registered agei		Registered Ag	ent signature requ	ired when reinstaling) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PT ADDITION ADDITION A	☐ DELETE	1.1 TITLE	İ		☐ Change ☐ Addition
NAME	TURNER, ARCHIBALD A		1.2 NAME			
STREET ADDRESS	2860 N W 187TH STREET		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33056		1.4 City - S	IT-ZIP		
TITLE	DS	DELETE	2.1 TITLE	1		Change Addition
NAME	TURNER, RUFINA L		2.2 NAME	1		
STREET ADDRESS	2860 N. W 187TH STREET		2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33056		2. 4 CITY-	ST-ZIP		
TITLE	VP	☐ DELETE	3.1 TITLE		***	Change Addition
NAME	TURNER, ANTONY		3.2 NAME			
STREET ADDRESS	45 W. 36 ST.		3.3 STREET	ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10018		3.4. CITY -	ST-ZIP		
TITLE	AS	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	NEAL, ANN		4. 2 NAME			
STREET ADDRESS	2860 N W 187TH STREET		4.3 STREET	ADDRESS		
CHY-ST-ZIP	MIAMI FL 33056		4.4 CITY - S			
TITLE	VP	☐ DELETE	5.1 TITLE			Change Addition
NAME	TURNER, ARCHENE		5.2 NAME			
STREET ADDRESS	2860 N W 187TH STREET		5.3 STREET	Annesce		
City-St-21P	MIAMI FL 33056			1		
TITLE	VP	DELETE	5.4 CITY - S 6.1 TITLE	1-211		Change Addition
NAME	TURNER, DONNA					L Orlange L Audition
	2860 N W 187TH STREET		6.2 NAME			
STREET ADDRESS	MIAMI FI 33056		6.3 STREET			
CITY OF 71D	I MILEUMI EL SENCOCO		E 4 OITY C	ו מוליד		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is ruue and accurate and that my 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 in Block 12 or Block 13 if changed, or on an altachment with an address.

SIGNATURE:

whibald A Trumer hes 4/8/98 305-625-6814

R2E034 (10/97)