

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2003 8:00 am
Secretary of State

07-24-2003 90111 004 ***158.75

0148295 AB

DOCUMENT # F02000004945

1. Entity Name

ALL CITIES ENTERPRISES, INC.



Principal Place of Business
**1552 S. VINEYARD AVENUE
ONTARIO CA 91761**

Mailing Address
**22405 LA PALMA AVENUE
YORBA LINDA CA 92887**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

33-0720418

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MITCHELL, ADRIAN
210 S. GOLF COURSE DR.
HURLBURT FIELD FL 32544**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
BREWER, RON
1552 S. VINEYARD AVENUE
ONTARIO CA 91761** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BREWER, JEANNIE
1552 S. VINEYARD AVENUE
ONTARIO CA 91761** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. 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 report or supplemental report is true 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED BREWER

7/17/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment.

90146147

F02000004945



All Cities Enterprises

Watch Us Work & Grow Here. . .

1552 South Vineyard Avenue
Office No. (909) 292-0315

Ontario, CA 91761
Fax No. (909) 292-0316

July 17, 2003

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Reference: **All Cities Enterprises, Inc., '2003 Uniform Business Report**

To Whom It May Concern:

We received the '2003 Uniform Business Report and would like to request for the late fee of \$400.00 to be waived because this is the first notice that we have received.

Enclosed is our Check # 514708 in the amount of \$ 158.75, for the annual filing fee of \$ 150.00 and \$ 8.75 for the Certificate of Status.

Thank you for your kind consideration on this matter.

Sincerely yours,

Ron Brewer
President