

F02000004945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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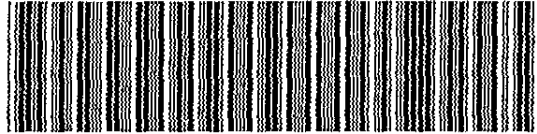
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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RACchange

09/05/03

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ALL CITIES ENTERPRISES

(Name of corporation)

**DOCUMENT NUMBER:** F02000004945

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WEVELYN WILLIAMS

(Name of person)

ALL CITIES ENTERPRISES

(Name of firm/company)

1552 S. VINEYARD AVENUE

(Address)

ONTARIO, CA. 91761

(City/state and zip code)

For further information concerning this matter, please call:

RON BREWER

(Name of person)

at ( 909 ) 292-0315

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,  
this statement of change is submitted for a corporation organized under the laws of the State of  
CALIFORNIA in order to change its registered office or registered agent, or both, in the State  
of Florida.

1. The name of the corporation: ALL CITIES ENTERPRISES, INC.
2. The principal office address: 1552 S. VINEYARD AVENUE, ONTARIO, CA 91761
3. The mailing address (if different): 1552 S. VINEYARD AVENUE, ONTARIO, CA 91761

4. Date of incorporation/qualification: 07/18/1996 Document number: \_\_\_\_\_
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

ADRIAN MITCHELL  
210 S. GOLF COURSE DRIVE  
HURLBURT FIELD, FLORIDA 32544

6. The name and street address of the new registered agent (if changed) and /or registered office (if  
changed):

CHARLES COOPER  
599 SHERWOOD AVENUE, SUITE. #103  
(P.O. Box or personal mailbox NOT acceptable)  
SATELLITE BEACH, FLORIDA

The street address of its registered office and the street address of the business office of its registered  
agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer, chairman or vice chairman of the board)

Ron Brewer President  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete  
performance of my duties, and I am familiar with and accept the obligation of my position as  
registered agent. Or, if this document is being filed merely to reflect a change in the registered  
office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

08.22.2003  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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