

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000001616

1. Entity Name
ALL AMERICAN CONVEYOR CORPORATION



Principal Place of Business

1819 FLUSHING AVENUE
RIDGEWOOD, NY 11385

Mailing Address

1819 FLUSHING AVENUE
RIDGEWOOD, NY 11385



01102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3242423

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAUPHIN, RICHARD
7145 NORTH SERENOA DRIVE
SARASOTA, FL 34241

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FRIEDMAN, VALDI
STREET ADDRESS	1819 FLUSHING AVENUE
CITY - ST - ZIP	RIDGEWOOD, NY 11385
TITLE	V
NAME	RASA-SOARECE, CONSTANTIN
STREET ADDRESS	1819 FLUSHING AVENUE
CITY - ST - ZIP	RIDGEWOOD, NY 11385
TITLE	S
NAME	DAUPHIN, RICHARD
STREET ADDRESS	7145 NORTH SERENOA DRIVE
CITY - ST - ZIP	SARASOTA, FL 34241
TITLE	T
NAME	SUBAIYA, PAUL
STREET ADDRESS	1819 FLUSHING AVENUE
CITY - ST - ZIP	RIDGEWOOD, NY 11385
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000181682
01/18/05-80007-016 150.00

**DO NOT WRITE
IN THIS SPACE**

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: *Valdi Friedman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 01/11/05

Date

Daytime Phone #