

MAR 23 2006 11:15 AM FR

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90350 022 ***150.00

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1. Entity Name
ALL HOWROYD SERVICES COMPANY



Principal Place of Business
**327 WEST BROADWAY
GLENDALE, CA 91204**

Mailing Address
**P.O. BOX 29048
GLENDALE, CA 91209-9048**

40043000



03232006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

95-4343699

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CHADWICK, ANNA
202 HOWARD DRIVE
BELLEAIR BEACH, FL 33785**

7. Name and Address of New Registered Agent

Name **CORPORATION SERVICE COMPANY**

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

1201 HAYS STREET

City

TALLAHASSEE

FL

Zip Code

32301

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.

Karen M. Dyer, Asst Sec.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/29/06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **CP** ☐ Delete
NAME **JANICE BRYANT HOWROYD**
STREET ADDRESS **1999 WEST 190TH STREET**
CITY-ST-ZIP **TORRANCE, CA 90504**

TITLE **VCV** ☐ Delete
NAME **BRYANT, CARLTON**
STREET ADDRESS **1999 WEST 190TH STREET**
CITY-ST-ZIP **TORRANCE, CA 90504**

TITLE **DT** ☐ Delete
NAME **HOYAL, MICHAEL**
STREET ADDRESS **327 WEST BROADWAY**
CITY-ST-ZIP **GLENDALE, CA 91204**

TITLE **S** ☐ Delete
NAME **BRYANT, TINA**
STREET ADDRESS **1999 WEST 190TH STREET**
CITY-ST-ZIP **TORRANCE, CA 90504**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Janice Bryant Howroyd

JANICE BRYANT HOWROYD PRESIDENT 4/4/06 818-240-8688