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

\*ROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

F44939

(9)

ALL ACTION, INC.

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| May 18 1998 8:00an | 1 |
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| Secretary of State |   |

EII ED



Dayline Prone # 0303764

| rincipal Place  | e of Business   | Mailing Address   |  |  |  |                                    |                                     |
|---|---|---|--|--|--|------------------------------------|-------------------------------------|
| 8921 W OAKLAND PARK BLVD<br>16100 NE 18TH AVE STE B<br>SUNRISE FL 33351<br>US   |   | 6921 W OAKLAND PARK BLVD<br>16100 NE 16TH AVE STE B<br>SUMRISE FL 33351<br>US |  | E B  | DO NOT WRITE IN  | THIS SPACE                         |                                     |
|   |   |   |  | 3. Date Incorporated or Qualified 09/16/1981   |  |                                    |                                     |
| Principal Pl  | ace of Business   | 2a. Mailing Address   |  |  | 4. FEI Number  |                                    | Applied For                         |
| <u>L</u>  |   | 26  |  |  | 59-2150663   |                                    | Not Applicab                        |
| Suite, Apt i  | #, etc.   | Suite Apt #. etc  |  |  | 5. Certificate of Status Desired   |                                    | Additional                          |
| City & State  |   | City & State  |  |  | <del>-  </del>   |                                    | Required                            |
| City & State  | <del>2</del>  | }   |  |  | Election Campaign Financing     Trust Fund Contribution  |                                    | May Be<br>I to Fees                 |
| Zip   | Country   | <b>28</b> Zip   | Coun   | rv   |  |                                    |                                     |
| ]   | 25  | 29  | 30   | .,   | <ol><li>This corporation owes or has paid the<br/>Personal Property Tax due June 30.</li></ol> | <b>—</b> ′                         | ntangible<br>□ No                   |
|   | 9. Name and Address of Cui  |   |  |  | 10. Name and Address of New Regist   |                                    |                                     |
| THO   | OMAS, DONNA C   |   |  | 1 Name   |  |                                    |                                     |
|   | 7 CORKWOOD TERRACE  |   | -  | 2 Street Add   | dress (P.O. Box Number is Not Acceptable)  |                                    |                                     |
|   | MARAC FL 33332  |   | "  | Sireer Add   | aress (rr.c), box mulliber is not acceptable)  |                                    |                                     |
|   |   |   | 1  | 3  |  |                                    |                                     |
|   |   |   | 1  | 4 City   |  | Tapl 7.                            | Code                                |
|   |   |   | •  | 4 City   |  | FL  85   Zip                       | Code                                |
| office or re  | egistered agent, or both, in the St   | tate of Florida. Such change w  | vas authorized   | by the corpora   | rporation submits this statement for the purporation's board of directors. I hereby accept the |                                    |                                     |
| agent. I ar   | in raminar with, and accept the or  | bligations of, Section 607.0505   | o, Florida Stalu   | es.  |  |                                    |                                     |
| GNATURE .   |   |   |  |  |  |                                    |                                     |
| GNATURE .   | Signature, typed or printed name of regionse.   | d agent and blue र apolic able  | (NOTE_Registered)  |  | <del></del>  | DATE DIDECTO                       | NDC 181 40                          |
| GNATURE   | Signature, typed or printed name of regions. OFFICERS   | Copert and life if apos able AND DIRECTORS                                    | (NOTE Registered)  | gent's gnature requ  | ared when revisiting) D ADDITIONS/CHANGES TO OFFICERS  | S AND DIRECTO                      |                                     |
| GNATURE .   | Signature typed or printed harve of regionals OFFICERS  | d agent and blue र apolic able  | (NOTE_Registered)  13.  1.1 TIFE   | dent's gnature requ  |  |                                    |                                     |
| GNATURE<br>I.<br>LE   | Signature typed of printed harve of regionals OFFICERS PSD THOMAS, DONNA C                    | AND DIRECTORS   | (NOTE Registered)  13. 1.1 Tife 1.2 NAM  | gent's gnature requ  |  | S AND DIRECTO                      |                                     |
| GNATURE  LE  ME  REET ADORESS   | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | AND DIRECTORS   | (NOTE Registered) 13. 1.1 TITL 1.2 NAM 1.3 STRI  | gent's gnature requi   |  | S AND DIRECTO                      |                                     |
| GNATURE  LE  ME  REET ADORESS  Y-ST-ZIP   | Signature typed of printed harve of regionals OFFICERS PSD THOMAS, DONNA C                    | AD, pert and life of appositule  AND DIRECTORS  DELETE                        | (NOTE Registers 2 / 13 / 1.1 THE 12 NAM 13 STRI 1.4 C I)   | oent's gnature requi   |  | S AND DIRECTO                      | ☐ Additi                            |
| GNATURE  L  LE  ME  REET ADORESS  IY-ST-ZIP  LE   | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | AND DIRECTORS   | (NOTE Registered) 13. 1.1 TITA 1.2 NAM 1.3 STRI 1.4 C TY 2.1 TITA  | o-int's gnature requi  |  | S AND DIRECTO                      | ☐ Additi                            |
| GNATURE  LE  ME  REET ADDRESS (Y-ST-ZIP  LE  ME   | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | AD, pert and life of appositule  AND DIRECTORS  DELETE                        | (NOTE Registeres) 13. 1.1 THE 1.2 NAM 1.3 STRI 1.4 C TY 2.1 THE  | gent's gnature requi   |  | S AND DIRECTO                      | ☐ Additi                            |
| GNATURE  LE  ME  REET ADORESS  IY-ST-ZIP  LE  ME  REET ADORESS  | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | AD, pert and life of appositule  AND DIRECTORS  DELETE                        | 13.<br>1.1 TITE<br>1.2 NAM<br>1.3 STRI<br>2.1 TITE<br>2.2 NAM<br>2.3 STRI  | oent's gnature requi   |  | S AND DIRECTO                      | ☐ Additi                            |
| GNATURE  LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP  | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | AD, pert and life of appositule  AND DIRECTORS  DELETE                        | (NOTE Registered)  13. 1.1 TITE 1.2 NAW 1.3 STRI 1.4 C TY 2.1 TITE 2.2 NAW 2.3 STRI 2.4 CIT  | 9-int's gnature requi  |  | S AND DIRECTO                      | Additi                              |
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| GNATURE  LE ME ME SEET ADORESS Y-ST-ZIP LE ME SEET ADORESS Y-ST-ZIP LE ME ME ME ME ME   | Signature typed of protect hard of regionals OFFICERS PSD THOMAS, DONNA C 7417 CORKWOOD TERRA | CE  | (NOTE Registere 2)  13. 1.1 Tife 1.2 NAM 1.3 STRI 1.4 C TY 2.1 Tife 2.2 NAM 2.3 STRI 2.4 CIF 3.1 Tife 3.2 NAM  | g-int's gnature requirements ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP   |  | S AND DIRECTO Change               | Additi                              |
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