

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086728

Entity Name: ALL STATE CARRIERS, LLC

FILED  
Jan 07, 2010  
Secretary of State

**Current Principal Place of Business:**

301 CRAWFORD BLVD  
202  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

301 CRAWFORD BLVD #202  
BOCA RATON, FL 33432

**New Mailing Address:**

301 CRAWFORD BLVD  
SUITE 202  
BOCA RATON, FL 33432

FEI Number: 26-3383642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COHEN, GADI  
301 CRAWFORD BLVD  
202  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

COHEN, GADI  
301 CRAWFORD BLVD  
SUITE 202  
BOCA RATON, FL 33432 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

01/07/2010

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COHEN, GADI  
Address: 301 CRAWFORD BLVD #202  
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GADI COHEN

MGR

01/07/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date