## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 11, 2005 08:00 AM

DOCUMENT # M46217  1. Entity Name ALL FRIENDS CORP.		Secretary of State
Principal Place of Business Mailing Address C/O EBERTO TAPANES C/O EBERTO TAP 3401 N.W. 7TH AVENUE 3401 N.W. 7TH A MIAMI, FL 33127 MIAMI, FL 3312	(V <b>en</b> ue	L INCONOCA IN BURKE WANT HENCE AND HER AND HER BURKE BURKE WANT BURKE WANT BURKE WANTED
		02102005 No Chg-P CR2E034 (10/03)
DO NOT WRITE IN THIS	SPACE	4. FEI Number Applied For 59-2768237 Not Applicable  5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Current Registered Agent		Fee Required
TAPANES, EBERTO 3401 N.W. 7TH AVENUE MIAMI, FL 33127		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 reinstaling) DATE
After May 1, 2005 Fee will be \$550.00 Trust Fund	ampaign Financing \$5. d Contribution.	.00 May Be led to Fees
10. OFFICERS AND DIRECTORS		
NAME TAPANES, EBERTO STREET ADDRESS 3401 N.W. 7TH AVENUE CITY-ST ZIP MIAMI, FL		U00000260110 03212705-80011-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY - ST- ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: SENTE AND TYPEDOR PRINTED NAME OF SIGNING OFFICE A OR DIRECTOR (MESNAM) 3/14/01 Daytoma Phone #		