PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

ALLMAT, INC.

DOCUMENT #

1. Corporation Name

FILED Aug 02, 1999 8:00 am Secretary of State

08-02-1999 90004 019 ***150.00

,	,					
						/// B/AR B/B// B/B// B/B// B/B// B/B// B/B// B/B// B/B//
Principal Place	of Business	Mailing Address				
2033 NE 14TH CT 2033 NE 14TH CT FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304						
FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304 US US					DO NOT WRITE	IN THIS SPACE
				3.	Date Incorporated or Qualified	
					<u>08/08/1988</u>	
	ace of Business	2a. Mailing Address	3	4.	FEI Number	Applied For
<u> </u>	INTAMEDASTAL DRIVE	26			58-2909744	Not Applicable \$8.75 Additional
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5.	Certificate of Status Desired	Fee Required
City & State		City & State			Election Campaign Financing	\$5.00 May Be
City & State	idendice for	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8.	This corporation owes the currer	nt year
<u></u> - 3 3-3	104 25 Brownd	29 3	50	1	Intangible Personal Property	Yes No
	9. Name and Address of Current	Registered Agent		10.	Name and Address of New Re	gistered Agent
81 Name						
MATHEWS, FREDERICK 2840 N.E. 47TH ST. GIG IN TANCONSTAC DAIVE				2 Street Address (P.O. Box Number is Not Acceptable)		
F	the Caudalante Fen		84 City		*******	85 Zip Code
						FL 33 24 5555
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered agent a	(E: Registered Agent signatu		n reinstating) DDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
12.	OFFICERS AND		13.	<u>^</u>	DUTTONS/CHANGES TO OTT	Change Addition
TITLE	PD WATHEWS EDENERICK	DELETE	1.2 NAME			
NAME	MATHEWS, FREDERICK -2033 NE 14TH CT		1.3 STREET ADDRESS	6-16	INTERMEDIATAC DAL	VE
STREET ADDRESS	ET LAUDERDALE FL		1.4 CITY-ST-ZIP		INTERMEDISTACDAL LAULONDAILE FLA STATE AS ABO.	33304
CITY-ST-ZIP TITLE	SD SD	DELETE	2.1 TITLE		/	. · Change Addition
NAME	MATHEWS, D. BELINDA		2.2 NAME			
STREET ADDRESS	2003 NE 14TH-OT		2.3 STREET ADDRESS	216	SAME AS ABOU	/1
CITY-ST-ZIP	FT :LAUDENDALE: FL		2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS	}		3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE	-	DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME	1		ļ
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		··	4,4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	-		ĺ
STREET ADDRESS			5.3 STREET ADORESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP	<u></u>		
TITLE	÷	DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS		_	6.3 STREET ADDRESS			ļ
CITY-ST-ZIP		A Comment	6.4 CITY-ST-ZIP	in coetion 44	9.07/3\(i) Florida Statutos I furth	per cartify that the information

of qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears address. 14. I hereby certify that the information supplied with this filing doe indicated on this annual report or supplemental annual report an officer or director of the corporating or the receiver or trust in Block 12 or Block 13 if changed from an attackment with

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Phones 947-9877 or 947-9892

M93954.

ACCOUNTING
BOOKEEPING
BUSINESS ADVISOR
TAX RETURNS

VICTOR REINER ASSOCIATES, INC.

1944 N.E. 163RD STREET ... No. MIAMI BEACH, FLA. 33162

599407-90004-19

VICTOR REINER

MEMBER FLORIDA ASSOCIATION OF INDEPENDENT ACCOUNTANTS

7/28/91

to whom it MAY COMORN:

PIENIE & Advised WE did NOT-RECEIVE the
ONIGINAL ANNUAL REMOTE PACKAGE, PROBABLY due
To the fact WE MOVED TO A NOW JOCATION:
TO the fact WE MOVED TO A NOW JOCATION:
WE DID RECEIVE the Second package
WE DID RECEIVE the Second package
AND AS PEN MY CONVENDATION WITH SHAWN
TONER 7/13/55, WE AND ENJOYING A Check
For 150.00

Condininy

Jan Jan