

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90245 008 ***150.00

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1. Entity Name
ALLEN-MCNULTY, INC.



Principal Place of Business
**3094 S OAKLAND FOREST DR
APT 1704
OAKLAND PARK, FL 33309-7504**

Mailing Address
**3094 S OAKLAND FOREST DR
APT 1704
OAKLAND PARK, FL 33309-7504**

54030493



2. Principal Place of Business
1428 Plunkett Street
Suite, Apt. #, etc.

3. Mailing Address
1428 Plunkett Street
Suite, Apt. #, etc.

03112004 Chg-P CR2E034 (10/03)

City & State
Hollywood, FL

City & State
Hollywood, FL

4. FEI Number
65-0974689

Applied For
Not Applicable

Zip Country
33020-6432 USA

Zip Country
33020-6432 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ALLEN, KATHLEEN
3094 S OAKLAND FOREST DR
APT 1704
OAKLAND PARK, FL 33309**

7. Name and Address of New Registered Agent

Name -
Kathleen Allen
Street Address (P.O. Box Number is Not Acceptable)
1428 Plunkett Street
City
Hollywood FL Zip Code
33020

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 *Kathleen Allen*
Signature, typed or printed name of registered agent and title if applicable.

Kathleen Allen

(NOTE: Registered Agent signature required when reinstating)

4/7/04
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **ALLEN, KATHLEEN**
STREET ADDRESS **3094 S OAKLAND FOREST DR, APT 1704**
CITY-ST-ZIP **OAKLAND PARK, FL 333097504**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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 **D/P/T** ☒ Change ☐ Addition
NAME **Kathleen Allen**
STREET ADDRESS **1428 Plunkett Street**
CITY-ST-ZIP **Hollywood, FL 33020-6432**

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

TITLE ☐ Change ☐ Addition
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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: *Kathleen Allen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Kathleen Allen

4/7/04
Date

Daytime Phone #