

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018856

Entity Name: ALL INSURANCE INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

16936 S. DIXIE HWY
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

16936 S. DIXIE HWY
MIAMI, FL 33157 US

New Mailing Address:

FEI Number: 65-0984402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEMBRENO, SORAYA
16936 S DIXIE HWY
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

MEMBRENO, MANUEL I
16936 S DIXIE HWY
MIAMI, FL 33157 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: MANUEL I MEMBRENO

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MEMBRENO, SORAYA
Address: 16936 S DIXIE HWY
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MEMBRENO, MANUEL I
Address: 16936 S DIXIE HWY
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL I MEMBRENO

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date