

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90110 032 ***550.00

DOCUMENT # P00000033336

1. Entity Name
ALL NATIONS, INC.

Principal Place of Business
1401 S. ST. ROAD 7
NORTH LAUDERDALE FL 33068

Mailing Address
1401 S. ST. ROAD 7
NORTH LAUDERDALE FL 33068

2. Principal Place of Business
1401 So STATE ROAD 7

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
NORTH LAUDERDALE FL

City & State

4. FEI Number **65-1014342**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, KEITH
11640 NW 56 DRIVE
SUITE 21-107
CORAL SPRINGS FL 33076

7. Name and Address of New Registered Agent

Name **ROBINSON KEITH**
 Street Address (P.O. Box Number is Not Acceptable)

6110 WILES ROAD

City **CORAL SPRINGS**

FL

Zip Code **33067**

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 *Keith Robinson*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **7/1/02**

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☒ Delete
 NAME **ROBINSON, KEITH**
 STREET ADDRESS **11640 NW 56 DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33076**

TITLE **SVD** ☒ Delete
 NAME **BRADIE, JOAN**
 STREET ADDRESS **11640 NW 56 DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33076**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD.** ☒ Change ☐ Addition
 NAME **ROBINSON KEITH**
 STREET ADDRESS **6110 WILES ROAD**
 CITY-ST-ZIP **CORAL SPRINGS FL 33067**

TITLE **SVD.** ☒ Change ☐ Addition
 NAME **BRADIE JOAN**
 STREET ADDRESS **6110 WILES ROAD**
 CITY-ST-ZIP **CORAL SPRINGS FL 33067**

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Keith Robinson

CR2E034 (4/02)