

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046793

Entity Name: ALL-SHINE, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

26812 ROBINHOOD LN.
BONITA SPRINGS, FL 34135

New Principal Place of Business:

8537 TAMARA CT
BONITA SPRINGS, FL 34135

Current Mailing Address:

26812 ROBINHOOD LN.
BONITA SPRINGS, FL 34135

New Mailing Address:

8537 TAMARA CT
BONITA SPRINGS, FL 34135

FEI Number: 65-1020400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FARRELL, JAMES T
26812 ROBINHOOD LN.
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

FARRELL, JAMES T
8537 TAMARA CT
BONITA SPRINGS, FL 34135 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:

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARRELL, JAMES T
Address: 26812 ROBINHOOD LN.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP () Delete
Name: HALL, DANIEL G
Address: 26812 ROBINHOOD LN.
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARRELL, JAMES T
Address: 8537 TAMARA CT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: HALL, DANIEL G
Address: 8537 TAMARA CT
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES T FARRELL

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date