

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000080151

1. Entity Name
ALL AMERICAN LAND ACQUISITION CORP.



Principal Place of Business
**9330 NW 110TH AVENUE
MIAMI, FL 33178**

Mailing Address
**9330 NW 110TH AVENUE
MIAMI, FL 33178**



01092006 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-1038888

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**CARROLL, LINDA L
CARROLL & ASSOCIATES, P.A.
1260 SUNTRUST INTL CTR. 1 SE 3RD AVE.
MIAMI, FL 33131**

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DIAZ OLIVER, REMEDIOS
STREET ADDRESS	9330 NW 110TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	V
NAME	DIAZ OLIVER, FAUSTO
STREET ADDRESS	9330 NW 110TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Remedios Diaz **1/10/06** **305-887-079**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR