2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011191

FILED Jan 05, 2007 Secretary of State

Entity Name: ALL RESTORATION SERVICES INC. **Current Principal Place of Business: New Principal Place of Business:** 4849 NE 11 AVE OAKLAND PARK, FL 33334 **Current Mailing Address: New Mailing Address:** 4849 NE 11 AVE OAKLAND PARK, FL 33334 FEI Number: 52-2313582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KODSY, SHERIF KODSY, SHERIF 4849 NE 11 AVENUE 1230 SW 29 TERRACE OAKLAND PARK, FL 33334 FT. LAUDERDALE, FL 33312 US 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: 01/05/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KODSY, SHERIF KODSY, SHERIF Name: Name: 1230 SW 29 TERRACE 4849 NE 11 AVENUE Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33312 City-St-Zip: OAKLAND PARK, FL 33334 Title: () Delete Title: () Change () Addition Name: KODSY, ESTHER Name: 23840 MORITZ Address: Address: OAK PARK, MI 48237 City-St-Zip: City-St-Zip:

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: SHERIF KODSY D 01/05/2007