

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 05, 2007
Secretary of State**

DOCUMENT# P01000049509

Entity Name: ALL DESIGN SYSTEMS, INC.

Current Principal Place of Business:

6941 SW 196TH AVE SUITE 33
PEMBROKE PINES, FL 33332 US

New Principal Place of Business:

6941 SW 196TH AVENUE
SUITE 33
PEMBROKE PINES, FL 33332 US

Current Mailing Address:

6941 SW 196TH AVE SUITE 33
PEMBROKE PINES, FL 33332 US

New Mailing Address:

6941 SW 196TH AVENUE
SUITE 33
PEMBROKE PINES, FL 33332 US

FEI Number: 65-1106079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDONA, ALBERTO
6246 SW 191ST AVE.
PEMBROKE PINES, FL 33332 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDONA, ALBERTO
Address: 6246 SW 191 AVENUE
City-St-Zip: PEMBROKE PINE, FL 33028 US

Title: V () Delete
Name: DANIEL, ACEVEDO F.
Address: 845 VANDA TERRACE
City-St-Zip: WESTON, FL 33327 US

Title: T () Delete
Name: ACEVEDO, SOCORRO
Address: 845 VANDA TERRACE
City-St-Zip: WESTON, FL 33327

Title: S () Delete
Name: JASPE, EVELYN
Address: 6246 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ACEVEDO, DANIEL
Address: 845 VANDA TERRACE
City-St-Zip: WESTON, FL 33327 US

Title: V (X) Change () Addition
Name: ALBERTO, CARDONA
Address: 6246 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33332 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ALBERTO CARDONA

V

03/05/2007

Electronic Signature of Signing Officer or Director

_____ Date