

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90254 039 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P01000062250																											
1. Entity Name ABOVE ALL, INC.																											
Principal Place of Business 7707 MARBELLA CREEK AVE. TAMPA, FL 33615		Mailing Address 7707 MARBELLA CREEK AVE. TAMPA, FL 33615																									
2. Principal Place of Business 2921 Arch St.		3. Mailing Address 2921 Arch St.																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																									
City & State Tampa, FL		City & State Tampa, FL																									
Zip 33607		Zip 33607																									
Country		Country																									
4. FEI Number 59-3730931		Applied For Not Applicable																									
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent SOTO, WALTER 7707 MARBELLA CREEK AVE. TAMPA, FL 33615		7. Name and Address of New Registered Agent Name: Soto, Walter Street Address (P.O. Box Number is Not Acceptable): 2921 Arch St. City: Tampa FL Zip Code: 33607																									
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: <i>Walter Soto</i>		DATE: 4.27.04																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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12. 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 10 or Block 11 if changed, or on an attachment with the address with all other like empowered.																											
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE																									