

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075938

Entity Name: ALLRELATIONS, INC.

FILED
Mar 13, 2008
Secretary of State

Current Principal Place of Business:

2114 N FLAMINGO RD
SUITE 186
PEMBROKE PINES, FL 33028

Current Mailing Address:

2114 N FLAMINGO RD
SUITE 186
PEMBROKE PINES, FL 33028

New Principal Place of Business:

1900 N. BAYSHORE DRIVE
SUITE 3707
MIAMI, FL 33132

New Mailing Address:

1900 N. BAYSHORE DRIVE
SUITE 3707
MIAMI, FL 33132

FEI Number: 65-1128493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLAFANE, GERARDO
2114 N FLAMINGO RD
SUITE 186
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

VILLAFANE, GERARDO
1626 NW 143RD WAY
PEMBROKE PINES, FL 33028 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:

03/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VILLAFANE, GERARDO
Address: 2114 N FLAMINGO RD., SUITE 186
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DVP () Delete
Name: VILLAFANE, GERARDO
Address: 2114 N FLAMINGO RD., SUITE 186
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DS () Delete
Name: FUEGUEL, PABLO
Address: 2114 N FLAMINGO RD., SUITE 186
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DT (X) Delete
Name: FUEGUEL, PABLO
Address: 2114 N FLAMINGO RD., SUITE 186
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: YEPES, HERNAN SR
Address: 1626 NW 143RD WAY
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DT (X) Change () Addition
Name: LASPRILLA-DE-YEPES, MARTHA E
Address: 1626 NW 143RD WAY
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DS (X) Change () Addition
Name: FUEGUEL, PABLO
Address: 1626 NW 143RD WAY
City-St-Zip: PEMBROKE PINES, FL 33028

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

I hereby certify that the information supplied with this filing does not qualify 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: HERNAN YEPES

P

03/13/2008

Electronic Signature of Signing Officer or Director

Date