## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000080561

FILED May 10, 2004 Secretary of State

Entity Name: ALL DAY CONSULTING & FINANCIAL SERVICES INC.

Current Principal Place of Business:		New Principal Place of Business:		
123 N CO 191	NGRESS AVE			
	N BEACH, FL 3	33426		
Current Mailing Address:		New Mailing Address:		
	NGRESS AVE			
191 Boyntor	N BEACH, FL 3	33426		
FEI Number	: 52-2343912	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
123 N COI 191	M, DAYAN NGRESS AVE N BEACH, FL 3	33426		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both
	e of Florida.	submits this statement for the	e purpose of changing its registe	red office or registered agent, or both
n the State	e of Florida. ´ RE:	submits this statement for the		red office or registered agent, or both  Date
n the State	e of Florida.  RE: Electron			
n the State	e of Florida.  RE: Electron	nic Signature of Registered A	gent	
n the State BIGNATUI Election Car DFFICER Fitle: Name: Address:	e of Florida.  RE: Electron mpaign Financing S AND DIREC	nic Signature of Registered A g Trust Fund Contribution ( ). TORS: Delete VAN ESS AVE, #191	gent	Date
n the State	e of Florida.  RE: Electron  mpaign Financing  S AND DIREC  PD ()  ABRAHAM, DAY  123 N CONGRE  BOYNTON BEA	ric Signature of Registered A  g Trust Fund Contribution ( ).  TORS: Delete (AN ESS AVE, #191 CH, FL 33426 Delete JSON ESS AVE,#191	gent  ADDITIONS/CHAN  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAYAN ABRAHAM P 05/10/2004