2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2005 08:00 AM Secretary of State DOCUMENT # P01000082601 1. Entity Name ALL É'S, INC. Principal Place of Business Mailing Address 12242 SW 26TH ST. 12242 SW 26TH ST. MIAMI, FL 33175 MIAMI, FL 33175 No Chg-P 04252005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 80-0020548 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HERRERA, EDUARDO A DO NOT WRITE 12242 SW 26TH ST. MIAMI, FL 33175 IN THIS SPACE 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. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when ministating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE PD HERRERA, EDUARDO A NAME STREET ADDRESS 12242 SW 26TH ST. CITY-ST-ZIP MIAMI, FL 33175 VD RTLE HERRERA, EDUARDO J NAME 12242 SW 26TH ST. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 ST TITLE NAME HERRERA, ELIZABETH C STREET ADDRESS 12242 SW 26TH ST. DO NOT WRITE MIAMI, FL 33175 CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 prusee empowered to execute his 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 an address, with all other like empoyaged.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #

FILED