

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024560

Entity Name: ALL COLORS, INC.

FILED
Apr 09, 2004
Secretary of State

Current Principal Place of Business:

15435 SOUTHWEST 36TH TERRACE
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

15435 SOUTHWEST 36TH TERRACE
MIAMI, FL 33185

New Mailing Address:

FEI Number: 02-0562786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

XIOMARA LEE, P.A.
2380 S.W. 80TH COURT
MIAMI, FL 33155 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: XIOMARA LEE

04/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: AMADOR, ONAN
Address: 15435 SOUTHWEST 36TH TERRACE
City-St-Zip: MIAMI, FL 33185

Title: SVD () Delete
Name: IRIZARRY, GERARDO
Address: 15435 SOUTHWEST 36TH TERRACE
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ONAN AMADOR

PTD

04/09/2004

Electronic Signature of Signing Officer or Director

Date