


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000050989	
1. Entity Name A ALL AMERICAN PAPER & JANITORIAL SUPPLY CO. INC.	

Principal Place of Business 13540 SW 128TH STREET, BAY 201 MIAMI, FL 33186	Mailing Address 13540 SW 128TH STREET, BAY 201 MIAMI, FL 33186
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02072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0757946	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	

6. Name and Address of Current Registered Agent

**PEREZ, RAUL
13540 SW 128TH STREET, BAY 201
MIAMI, FL 33186**

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000429188 02/21/06-80074-013 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PONS, VIVIAN 13520 SW 128TH ST., BAY 201 MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD PEREZ, RAUL 13520 SW 128TH ST., BAY 201 MIAMI, FL 33186
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

SIGNATURE: *Vivian Pons* **VIVIAN PONS** 2/6/06 **305-232-7272**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone