

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055437

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: ALL IMMIGRATION FORMS, INC

## Current Principal Place of Business:

1735 W 41 ST  
4  
HIALEAH, FL 33012

## New Principal Place of Business:

21821 NW 7 CT  
PEMBROKE PINES, FL 33029

## Current Mailing Address:

1735 W 41 ST  
4  
HIALEAH, FL 33012

## New Mailing Address:

21821 NW 7 CT  
PEMBROKE PINES, FL 33029

FEI Number: 02-0604559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, ERNESTO SR.  
1735 W 41 ST  
4  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

SANCHEZ, ERNESTO SR.  
21821 NW 7 CT  
PEMBROKE PINES, FL 33029 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: ERNESTO SANCHEZ

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SANCHEZ, ERNESTO SR.  
Address: 1735 W 41 ST APT 4  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: PEREZ, OSMAYDES MRS.  
Address: 1735 W 41 ST APT 4  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SANCHEZ, ERNESTO SR.  
Address: 21821 NW 7 CT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP (X) Change ( ) Addition  
Name: PEREZ, OSMAYDES MRS.  
Address: 21821 NW 7 CT  
City-St-Zip: PEMBROKE PINES, FL 33029

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: ERNESTO SANCHEZ

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date