

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078097

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: ALL SERVICE INSURANCE, INC.

## Current Principal Place of Business:

6635 W COMMERCIAL BLVD  
SUITE # 211  
TAMARAC, FL 33319

## New Principal Place of Business:

4300 N UNIVERSITY DRIVE  
SUITE # F-01  
LAUDERHILL, FL 33351

## Current Mailing Address:

C/O STEV9NAN, INC.  
6635 W COMMERCIAL BLVD - STE 211  
TAMARAC, FL 33319

## New Mailing Address:

C/O STEV9NAN, INC.  
4300 N UNIVERSITY DRIVE F-101  
LAUDERHILL, FL 33351

FEI Number: 20-0000111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARCUS, NANCY  
8000 NW 51ST STREET  
LAUDERHILL, FL 33351 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: MARCUS, NANCY C  
Address: 6635 W COMMERCIAL BLVD - STE 211  
City-St-Zip: TAMARAC, FL 33319

Title: VSD ( ) Delete  
Name: SIMMS, MAUREEN E  
Address: 6635 W COMMERCIAL BLVD - STE 200  
City-St-Zip: TAMARAC, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: MARCUS, NANCY C  
Address: 4300 N UNIVERSITY DRIVE F-101  
City-St-Zip: LAUDERHILL, FL 33351

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 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: NANCY MARCUS

PRES

01/05/2006

Electronic Signature of Signing Officer or Director

Date