

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000089363

1. Entity Name
ALL FLORIDA MANAGEMENT SERVICES, INC.



Principal Place of Business
1971 W MCNAB ROAD SUITE 4
POMPANO BEACH, FL 33069

Mailing Address
1971 W MCNAB ROAD SUITE 4
POMPANO BEACH, FL 33069



04302004 No Chg-P CR2E034 (10/03)

4. FEI Number
22-3865968

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FACEY, CAROL
1971 W MCNAB RD
POMPANO BEACH, FL 33069

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

000000153764
05/04/04-80138-024 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME GOULD, WILBUR
STREET ADDRESS 8121 SW 6TH CT
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE D
NAME FACEY, CAROL M
STREET ADDRESS 9432 NW 46TH CT
CITY-ST-ZIP SUNRISE, FL 33351

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol Facey - CAROL FACEY

4-26-04 954-917-441