## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000089363

Name:

Address:

City-St-Zip:

GOULD, JOEL L

8121 SW 6 COURT

NORTH LAUDERDALE, FL 33068

**FILED** Nov 03, 2006 Secretary of State

Entity Name: ALL FLORIDA MANAGEMENT SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1971 W MCNAB ROAD SUITE 2 POMPANO BEACH, FL 33069 **Current Mailing Address: New Mailing Address:** 1971 W MCNAB ROAD SUITE 2 POMPANO BEACH, FL 33069 FEI Number: 22-3865968 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOULD, JOEL L 1971 W MCNAB RD SUITE 2 POMPANO BEACH, FL 33069 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Delete Title: () Change () Addition GOULD, WILBUR B Name: Name: 1971 WEST MCNAB ROAD #4 Address: Address: City-St-Zip: POMPANO BEACH, FL 33068 City-St-Zip: Title: PD Title: () Change () Addition () Delete

Name:

Address:

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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: JOEL L. GOULD PD 11/03/2006