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P02000102118

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000102118

1. Entity Name

All State Relocations, Inc.



04 MAY 25 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

66414925

DO NOT WRITE IN THIS SPACE2. Principal Place of Business
401 NW 10th Terrace

Subs. Act. P. No.

3. Mailing Address
401 NW 10th Terrace

Subs. Act. P. No.

City & State
HialeahCity & State
HialeahZip
33009Country
USZip
33009Country
US4. FID Number
38-36814245. Additional
Fee Required5. Certificate of Status Desired ☐ \$8.75Additional
Fee Required

7. Name and Address of Current Registered Agent

Name David Torchin, C.P.A.

Street Address (P.O. Box Number is MC Acceptable)

8211 WEST BROWARD BLVD STE 200

City PLANTATION

FL

Zip

33324

**DO NOT WRITE
IN THIS SPACE**

8. The declarant hereby certifies that the information furnished is true and correct to the best of his knowledge and belief, and that he is not aware of any information which would cause the information furnished to be untrue or misleading.

SIGNATURE

03/29/04

Signature of Declarant
 Signature of Agent
 Signature of Secretary

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 may be
Added to Fees

10. OFFICERS AND DIRECTORS

NAME	ADDRESS	DATE
11. NAME 12. ADDRESS 13. CITY, STATE, ZIP	14. NAME 15. ADDRESS 16. CITY, STATE, ZIP	17. NAME 18. ADDRESS 19. CITY, STATE, ZIP
20. NAME 21. ADDRESS 22. CITY, STATE, ZIP	23. NAME 24. ADDRESS 25. CITY, STATE, ZIP	26. NAME 27. ADDRESS 28. CITY, STATE, ZIP
29. NAME 30. ADDRESS 31. CITY, STATE, ZIP	32. NAME 33. ADDRESS 34. CITY, STATE, ZIP	35. NAME 36. ADDRESS 37. CITY, STATE, ZIP
38. NAME 39. ADDRESS 40. CITY, STATE, ZIP	41. NAME 42. ADDRESS 43. CITY, STATE, ZIP	44. NAME 45. ADDRESS 46. CITY, STATE, ZIP
47. NAME 48. ADDRESS 49. CITY, STATE, ZIP	50. NAME 51. ADDRESS 52. CITY, STATE, ZIP	53. NAME 54. ADDRESS 55. CITY, STATE, ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing complies with the information stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information furnished on this report is a true and correct statement of the facts and that I am not aware of any information which would cause the information furnished to be untrue or misleading.

SIGNATURE:

Efrain Marsh

03/29/04

954-472-3124

CRED-008 (12/02)

Sent By: ;

0000000000;

Mar-29-04 10:16AM;

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Attachment

P02000102118 *44023000*
ALL STATE RELOCATIONS, INC.,
401 NW 10TH TERRACE
HALLANDALE, FLORIDA 33009

March 29, 2004
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Please be advised that the mailing address for my corporation has changed and I never received my year UBR forms.

As per the instructions that I received when calling your office in reference to this matter, I have enclosed a UBR that I have filled out with my new address along with a check to cover the filing fees for my corporation for 2003 and 2004.

Please accept the enclosed report and payments in full satisfaction of my 2003 and 2004 filing requirements.

Thank you,

Efraim Hersh

