

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000110782

1. Entity Name New All America, Inc.

FILED

03 MAY 13 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
1170 NW 79 St 208B  
Miami, Florida 33150

Mailing Address  
1170 NW 79 St. 208B  
Miami, Florida 33150

2. Principal Place of Business  
1170 NW 79 St. 208B

Suite, Apt. #, etc.  
208B

3. Mailing Address  
same

Suite, Apt. #, etc.  
same

City & State  
Miami, Florida 33150

City & State  
same

Zip Country  
33150 Miami-Dade

Zip Country  
33150 Miami-Dade

4. FEI Number

Applied For  
☒ Not Applicable

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

6. Name and Address of Current Registered Agent

Gräf Päige  
1170 N.W. 79 Street  
208B  
Miami, Florida 33150

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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 \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to:  
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME  
Felix Demmings PD ☐ Delete  
STREET ADDRESS  
1170 NW 79 St-208B  
CITY-ST-ZIP  
Miami, Florida 33150

TITLE NAME  
VP Director Robert Demmings ☐ Delete  
STREET ADDRESS  
9777 Westview Drive  
CITY-ST-ZIP  
Coral Springs, Fla. 33076

TITLE NAME  
CS Director Sue Demmings ☐ Delete  
STREET ADDRESS  
3030 NW 191 St  
CITY-ST-ZIP  
Miami, Florida 33054

TITLE NAME  
☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME  
Lloyd Cheever VP Director ☐ Change ☒ Addition  
STREET ADDRESS  
631 N.W. 177 St-#110  
CITY-ST-ZIP  
Miami, Florida 33169

TITLE NAME  
Yewande Sode VP Director ☐ Change ☒ Addition  
STREET ADDRESS  
6135 NW 186 St #112  
CITY-ST-ZIP  
Miami, Florida 33169

TITLE NAME  
Comfy Ibo CS Dir. ☐ Change ☒ Addition  
STREET ADDRESS  
6135 NW 186 St #112  
CITY-ST-ZIP  
Miami, Florida 33015

TITLE NAME  
200020416462 ☐ Change ☐ Addition  
STREET ADDRESS  
06/03/03--01018--009 \*\*\*58.75  
CITY-ST-ZIP

TITLE NAME  
BTS ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
200020416462 ☐ Change ☐ Addition  
STREET ADDRESS  
06/03/03--01018--010 \*\*\*100.00  
CITY-ST-ZIP

TITLE NAME  
☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like reported.

SIGNATURE: Felix Demmings  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 15th (305) 694-9676

Date

Daytime Phone #

CR2E037 (11/00)