


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000121022	
1. Entity Name ALL AMERICAN PROPERTY MAINTENANCE, INC.	

Principal Place of Business 16721 SW 298TH TERRACE HOMESTEAD, FL 33030	Mailing Address 16721 SW 298TH TERRACE HOMESTEAD, FL 33030
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DO NOT WRITE IN THIS SPACE



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number 06-1667229	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WATKINS, KATHLEEN H
16881 SW 266TH TERRACE
HOMESTEAD, FL 33031

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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] (NOTE: Registered Agent Signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BOYD, JACQUELINE A
STREET ADDRESS	16721 SW 298TH TERRACE
CITY - ST - ZIP	HOMESTEAD, FL 33030
TITLE	VP
NAME	BOGGESS, CLIFTON C
STREET ADDRESS	16721 SW 298TH TERRACE
CITY - ST - ZIP	HOMESTEAD, FL 33030
TITLE	S
NAME	DINGLE, JESSICA C
STREET ADDRESS	16721 SW 298TH TERRACE
CITY - ST - ZIP	HOMESTEAD, FL 33030
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/24/05-80128-008 150.00

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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 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: [Signature] **1-19-05** **305-347-1491**

Date Daytime Phone #