

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000030496

FILED
Aug 22, 2008
Secretary of State**Entity Name:** ALL TIME INSTALLATIONS, INC.**Current Principal Place of Business:**1315 53RD ST.
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MANGONIA PARK, FL 33407**New Principal Place of Business:****Current Mailing Address:**PO BOX 30686
PALM BEACH GARDENS, FL 33420**New Mailing Address:****FEI Number:** 05-0559683**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COLIA, MIKE
1315 53RD ST
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MANGONIA PARK, FL 33407 US**Name and Address of New Registered Agent:**WRIGHT, JOHN
1315 53RD ST
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MANGONIA PARK, FL 33407 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: JOHN WRIGHT

08/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: COLIA, MIKE
Address: PO BOX 30686
City-St-Zip: PALM BEACH GARDENS, FL 33420 US

Title: D () Delete
Name: WRIGHT, JOHN
Address: PO BOX 30686
City-St-Zip: PALM BEACH GARDENS, FL 33420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. 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: JOHN WRIGHT

D

08/22/2008

Electronic Signature of Signing Officer or Director

Date