

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90022 039 ***150.00

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1. Entity Name
ALL ABOUT YOU SERVICES, INC.



Principal Place of Business
**931 VILLAGE BLVD.
WEST PALM BEACH, FL 33409**

Mailing Address
**931 VILLAGE BLVD.
WEST PALM BEACH, FL 33409**

54014012

2. Principal Place of Business

11924 Forest Hill Blvd

3. Mailing Address

11924 Forest Hill Blvd.

Suite, Apt. #, etc.

Ste 22, #278

Suite, Apt. #, etc.

Ste 22, #278

City & State

Wellington, FL

City & State

Wellington, FL

Zip

33414

Country

USA

Zip

33414

Country

USA

02092004

Chg-P

CR2E034 (10/03)

4. FEI Number

54-2101586

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FORBES, OPAL
931 VILLAGE BLVD.
WEST PALM BEACH, FL 33409**

7. Name and Address of New Registered Agent

Name **OPAL FORBES-JACKSON**

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

11924 Forest Hill Blvd.

Ste 22, #278

City **Wellington**

FL

Zip Code

33414

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **FORBES, OPAL**
STREET ADDRESS **931 VILLAGE BLVD. STE 905-427**
CITY-ST-ZIP **WEST PALM BEACH, FL 33409**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **FORBES-JACKSON, OPAL**
STREET ADDRESS **11924 Forest Hill Blvd., Ste 22, #278**
CITY-ST-ZIP **Wellington, FL 33414**

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 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: **Opal Jackson** **OPAL FORBES-JACKSON** **2/24/04** **561-827-0156**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #