## 2005 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** Jan 14, 2005 08:00 AM DOCUMENT # P03000041112 **Secretary of State** ALL AMERICAN IRRIGATION & FILTRATION INC. Principal Place of Business .\_ \_Mailing Address 4310 S OCEAN BLVD 4310 S OCEAN BLVD HIGHLAND BEACH, FL 33487 HIGHLAND BEACH, FL 33487 US No Chg-P 01112005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-2011149 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PAGLIANTI, FRANK J PRES DO NOT WRITE 4310 S OCEAN BLVD IN THIS SPACE HIGHLAND BEACH, FL 33487 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS SECR TITLE PAGLIANTI, FRANK JR. NAME STREET ADDRESS 4310 S OCEAN BLVD, UNIT D HIGHLAND BEACH, FL 33487 CITY-ST-ZIP TITLE 11000000180599 NAME 01/14/05-80012-006 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CtTY-ST-7IP

E OF SIGNING OFFICER OR DIRECTOR