

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000059716

FILED
Nov 11, 2009
Secretary of State**Entity Name:** ALL AMERICAN FIRE INSPECTIONS, INC.**Current Principal Place of Business:**5536 NW 161 STREET
MIAMI GARDENS, FL 33014**New Principal Place of Business:****Current Mailing Address:**5536 NW 161 STREET
MIAMI GARDENS, FL 33014**New Mailing Address:****FEI Number:** 32-0079092**FEI Number Applied For** ()**FEI Number Not Applicable** ()**Certificate of Status Desired** (X)**Name and Address of Current Registered Agent:**SALEM, BASSAM
834 VERONA LAKE DR.
WESTON, FL 33326 US**Name and Address of New Registered Agent:**SALEM, BASSAM
5536 NW 161 STREET
MIAMI GARDENS, FL 33014 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: BASSAM SALEM

11/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALEM, BASSAM
Address: 834 VERONA LAKE DR
City-St-Zip: WESTON, FL 33326

Title: VP (X) Delete
Name: WIMMER, SZILVIA
Address: 834 VERONA LAKE DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALEM, BASSAM
Address: 5536 NW 161 STREET
City-St-Zip: MIAMI GARDENS, FL 33014

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: BASSAM SALEM

P

11/11/2009

Electronic Signature of Signing Officer or Director

Date