

2006 FOR PROFIT CORPORATION ANNUAL REPORT

17

FILED
Feb 17, 2006 8:00 am
Secretary of State

01-20-2006 90037 019 ***150.00

DOCUMENT # P03000085247			
1. Entity Name ALL AMERICAN PERSONNEL, INC.			
Principal Place of Business 343 FIELDSTREAM BLVD ORLANDO, FL 32828		Mailing Address 343 FIELDSTREAM BLVD ORLANDO, FL 32828	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 532078 Suite, Apt. #, etc.	
City & State Orlando, FL		City & State Orlando, FL	
Zip 32853		Country USA	
5. Name and Address of Current Registered Agent MAYO, FRANCISCO J 343 FIELDSTREAM BLVD ORLANDO, FL 32828		7. Name and Address of New Registered Agent Name: FRANCISCO J. MAYO Street Address (P.O. Box Number is Not Acceptable): P.O. Box 532078 City: Orlando FL Zip Code: 32853	
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 the applicable (NOTE: Registered Agent signature required when reappointing) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P NAME: MAYO, FRANCISCO J STREET ADDRESS: 343 FIELDSTREAM BLVD CITY-ST-ZIP: ORLANDO, FL 32828	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VST NAME: QUINTANA-MAYO, JACQUELINE STREET ADDRESS: 343 FIELDSTREAM BLVD CITY-ST-ZIP: ORLANDO, FL 32828	<input checked="" type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:		Date: 1/16/06 4074452222	

66001679



01162006 Chg-P CR2E034 (11/05)

4. FEI Number 77-0594810 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

NO Change

Leave this address in system



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2006

ALL AMERICAN PERSONNEL, INC.
P.O. BOX 532078
ORLANDO, FL 32828

Subject: ALL AMERICAN PERSONNEL, INC.

Reference Number: P03000085247

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The registered agent must have a **Florida** street address.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CJ

ANNUAL REPORTS SECTION