

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151176

Entity Name: ALLEN'S LATHING INC.

FILED
May 02, 2005
Secretary of State

Current Principal Place of Business:

8787 SOUTHSIDE BLVD.
APT. 6112
JACKSONVILLE, FL 32256

New Principal Place of Business:

8000 BAYMEADOWS CIR. E.
APT. 141
JACKSONVILLE, FL 32256

Current Mailing Address:

8787 SOUTHSIDE BLVD.
APT. 6112
JACKSONVILLE, FL 32256

New Mailing Address:

8000 BAYMEADOW CIR. E.
APT. 141
JACKSONVILLE, FL 32256

FEI Number: 59-3327134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, CHRIS M
8787 SOUTHSIDE BLVD.
APT. 6112
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ALLEN, CHRIS M
8000 BAYMEADOW CIR. E.
APT. 141
JACKSONVILLE, FL 32256 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: CHRIS M. ALLEN

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALLEN, CHRIS M
Address: 8787 SOUTHSIDE BLVD., APT. 6112
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALLEN, CHRIS M
Address: 8000 BAYMEADOWS CIR. E., APT. 141
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHRIS M. ALLEN

PD

05/02/2005

Electronic Signature of Signing Officer or Director

Date