


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000009686	
1. Entity Name ALL-WORLD SPORTS AND ENTERTAINMENT COLLECTIBLES, INC.	

Principal Place of Business 10719 N.W. 55TH ST. CORAL SPRINGS, FL 33076	Mailing Address 10719 N.W. 55TH ST. CORAL SPRINGS, FL 33076
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01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0591546	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) 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
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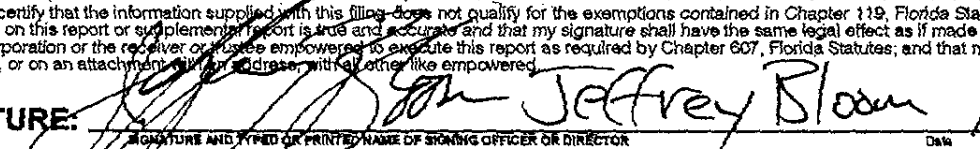
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BLOOM, JEFFREY I 10719 N.W. 55TH ST. CORAL SPRINGS, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BLOOM, KIMBERLY 10719 N.W. 55TH ST. CORAL SPRINGS, FL 33076
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01/24/06-80091-023 158.75

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 changed, or on an attachment, with or without address, with all other like empowered.

SIGNATURE:  **Jeffrey Bloom** 1/16/06 336-55954

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #