2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000039015

1. Entity Name
ALL SYSTEMS MAINTENANCE & REPAIR, INC.

Principal Place of Business	Mailing Address
P.O. BOX 3144 STUART, FL 34995	P.O. BOX 3144 STUART, FL 34995

DO NOT WRITE IN THIS SPACE

01112006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
34-1978335	Not Applicable

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

8. Name and Address of Current Registered Agent

HEATH, CHARLES L
21100 GLADES CUT OFF ROAD
PORT ST. LUCIE, FL 34987

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 _____
Signature, typed or printed name of registered agent and title if applicable.   (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. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PS
NAME	HEATH, CHARLES L
STREET ADDRESS	P.O. BOX 3144
CITY-ST-ZIP	STUART, FL 34995
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000484661
04/12/06-80051-012 150.00

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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: _____   3-27-06   772-215-4461
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #