

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117232

Entity Name: CARES ALL, INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

5973 BENT PINE DR.,  
APT. 2026  
ORLANDO, FL 32822

## New Principal Place of Business:

10215 SEROTINA CT  
ORLANDO, FL 32832

## Current Mailing Address:

5973 BENT PINE DR.  
APT. 2026  
ORLANDO, FL 32822

## New Mailing Address:

10215 SEROTINA CT  
ORLANDO, FL 32832

FEI Number: 16-1706633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSARIO, RAMON E  
2985 MICHIGAN AVENUE  
KISSIMMEE, FL 34744 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ESGUERRA, MARLENI  
Address: 5973 BENT PINE DR., APT. #2026  
City-St-Zip: ORLANDO, FL 32822

Title: VP ( ) Delete  
Name: ESGUERRA, OVIDIO  
Address: 5973 BENT PINE DR. APT. #2026  
City-St-Zip: ORLANDO, FL 32822

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ESGUERRA, MARLENI  
Address: 10215 SEROTINA CT  
City-St-Zip: ORLANDO, FL 32832

Title: VP (X) Change ( ) Addition  
Name: ESGUERRA, OVIDIO  
Address: 10215 SEROTINA CT  
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify for the 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: MARLENE ESGUERRA

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date