

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117916

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: ALLESTATES INVESTMENTS CORPORATION

## Current Principal Place of Business:

6157 NW. 167TH ST., SUITE F-15  
MIAMI, FL 33015

## New Principal Place of Business:

6157 NW. 167TH ST.,  
SUITE F-15  
MIAMI, FL 33015 US

## Current Mailing Address:

6157 NW. 167TH ST., SUITE F-15  
MIAMI, FL 33015

## New Mailing Address:

6157 NW. 167TH ST.,  
SUITE F-15  
MIAMI, FL 33015 US

FEI Number: 20-1498624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PORTA SR., JOSE C  
6157 NW. 167TH ST., SUITE F-15  
MIAMI, FL 33015 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: DP ( ) Delete  
Name: PORTA SR., JOSE C  
Address: 729 W. 53RD ST  
City-St-Zip: HIALEAH, FL 33012

Title: SD ( ) Delete  
Name: PORTA JR., JOSE C  
Address: 2221 NW. 101ST TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33026

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE C PORTA

DP

04/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date