2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166971

Entity Name: ALL AMERICAN CENTRAL FLORIDA SCREENS, INC.

FILED Aug 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RELL ROAD), FL 32817				
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
	RELL ROAD), FL 32817				
FEI Number	: 20-1993051	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1926 HAR ORLANDO	SON, JONATH RELL ROAD), FL 32817	US	pose of changing its registere	d office or registered agent, or both,	
	of Florida.	pur	poor or ontaing ing the regioners	a cinoc or regional agont, or zear,	
SIGNATURE:					
	Electror	ic Signature of Registered Agent		Date	
		3(2)(b), F.S., the corporation did not r g Trust Fund Contribution ().	eceive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HENDERSON, 1926 HARRELL ORLANDO, FL	. ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () HENDERSON, 1926 HARRELL ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () HENDERSON, 1926 HARRELL ORLANDO, FL	. ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TR (X FLEMING, ETH 1425 CAUDLE ORLANDO, FL	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JONATHAN HENDERSON P 08/17/2009