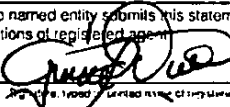
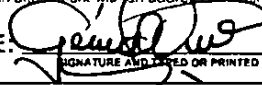


2006 FOR PROFIT CORPORATION ANNUAL REPORT

5/3/2006-90216-010-\$158.75-\$158.75

DOCUMENT # P05000159401 1. Entity Name ALL AXIS MACHINING, INC.						FILED 06 JUN 22 PM 12:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 1765 BANKS ROAD MARGATE, FL 33063				Mailing Address 1765 BANKS ROAD MARGATE, FL 33063			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 04282006 Chg-P CR2E034 (11/05)			
City & State		City & State					
Zip Country		Zip Country					
4. FEI Number				☒ Applied For ☐ Not Applicable			
5. Certificate of Status Desired				☒ \$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				7. Name and Address of New Registered Agent Name OSORIO, GERMAN A. Street Address (P.O. Box Number is Not Acceptable) 1765 BANKS ROAD City Margate FL Zip Code 33063			
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  GERMAN A. OSORIO				PRESIDENT		04/28/06	
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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP PSTD OSORIO, GERMAN A 1765 BANKS ROAD MARGATE, FL 33063				TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition 831 SW 70th Way North Lauderdale, FL 33068			
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition			
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  GERMAN A. OSORIO				04/28/06		(954) 786-0807	