2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2012
Secretary of State

DOCUMENT# P07000109191

Entity Name: ALL AMERICAN INSURANCE SYSTEMS, INC.

Current Principal Place of Business:

209 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

POB 51348
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

FEI Number: 59-2453521 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VEAL, SAMUEL A
209 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 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

OFFICERS AND DIRECTORS:

Title: P
Name: VEAL, SAMUEL A
Address: 209 SOUTH THIRD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: SEC
Name: VEAL, SAMUEL A
Address: 209 SOUTH THIRD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL A VEAL P 02/10/2012

Electronic Signature of Signing Officer or Director Date