2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000036627

Entity Name: ALL ABOUT INSURANCE JAX, INC.

FILED Apr 21, 2012 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
12627 SAN JOSE BLVD 105					
	IVILLE, FL 322	23			
Current Mailing Address:			New Mailing Address:		
12627 SAN JOSE BLVD					
105 JACKSONVILLE, FL 32223					
FEI Number	: 45-1681790	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
12627 SAI 105	D, YERNLY B N JOSE BLVD IVILLE, FL 322	23 US			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
OFFICER	S AND DIRECT	ORS:			
Title: Name: Address:	P FERRAND, YER 8078 WELBECK				

City-St-Zip: JACKSONVILLE, FL 32244

BECKER, IRMA I Name:

230 NORTH RIDGE DRIVE Address: City-St-Zip: FLEMING ISLAND, FL 32003

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: IRMA BECKER VΡ 04/21/2012