FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham.

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P92000008120 (7)

ALL IN PRODUCTION SERVICES, INC.

Mailing Address Principal Place of Business 928 LAKE MARION DRIVE 928 LAKE MARION DRIVE ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701 3. Date Incorporated or Qualified 3a. Date of Last Report 05/11/1995 11/24/1992 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3152375 26 21 Suite, Apt. #, etc. Certificate of Status Desired Suite, Apt. #. etc

27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Zip ☐ Yes ☐ No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent

GREENE, KELLY B 928 LAKE MARION DRIVE **ALTAMONTE SPRINGS FL 32701**

l	10. Name and Addition		
81	Name		
62	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	85	Zip Code

11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or rejustered agent, or both, in the Statut of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am

SIGNATURE	हाज कर क्रिकेट हो है। दिस कार्यो का कार्य कर जे हैं। 115 में अंबे	eat a more	's - Frequitered Agent signature required	diaser missatings OATE
12.	OFFICERS AND DIRECTO	ORS	13.	ADDITIONS: CHANGES TO OFFICERS AND DIRECTORS IN 12
DILE	D	DELETE	1 1 THE	Change Addition
NAME	GREENE, KELLY B		1.2 NAME	
STREET ADDRESS	928 LAKE MARION DRIVE		1.3 STREET ADDRESS	
CITY-ST-7P	ALTAMONTE SPRINGS FL 32701		1.4 CHY-ST ZIP	
TITLE	D	DE.EIE	2 1 T-ILE	Change Addition
NAME	GREENE, FORREST A		2.2 NAME	
STREET AUDRESS	928 LAKE MARION DRIVE		2.5 STREET ADDRESS	
	ALTAMONTE SPRINGS FL 32701		2.4 C(TY \$1 - 70°	
CITY - ST - ZIP	ALIMINITE OF THE PARTY OF THE P	DELFTE	3 1 Tekt	Change Addition
NAME			3.2 NAME	
STHEET ADDRESS			3.3 STREET ADDRESS	
			3.4.C-TY - ST - 7/P	
C(1Y - S1 - Z(F		DELFTE	4 1 THILE	500001786216 Addition
NAME			4.2 NAME	-04/18/9601110031
STREET ADDRESS			4.3 STREET ADDRESS	***200.00
			4.4.6.1TY - ST - ZIP	
CITY ST-ZIP		DELETE	5 1 Tillet	Change Addition
			5.2 NAME	
NAME.			5.3 STREET ADDRESS	
STREE! ADDRESS			■ ·	

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this angular report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this angular report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this angular report or supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes, I further certification in the supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Society further certification in the supplied with appears in Block

5.4.013 y - ST - ZiP

63 STHEET ADDRESS

6 1 TiT∟E

6.2 NAME

SIGNATURE

CITY-ST-709

STREET ADDRESS

7:11.8

NAME

OFFICER OF DIRECTOR

[] DELETE

Change

Addition

)V

Applied For

\$8.75 Additional

Fee Required

Not Applicable