FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 11 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000022461 (6)

1. Corporation Name

ALL COUNTY RESTORATION, INC.

Principal Place of Business	Mailing Address
215 NE 32 CT FT. LAUDERDALE FL 33334 US	215 NE 32 CT FT. LAUDERDALE FL 33334 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/22/1993
3a. Date of Last Report: 05/25/1994
4. FEI Number: 65-0421976 — Applied For / Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation is liable for intangible tax under s. 199.032 Florida Statutes [ ] Yes [X] No

2. Principal Place of Business / 2a. Mailing Address (21–30: Suite, Apt #, etc.; City & State; Zip; Country)

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BULZACCHELLI, DANIEL 215 NE 32 CT FT. LAUDERDALE FL 33334	81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 84 City: FL 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 registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: DB Daniel Bulzacchelli

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: BULZACCHELLI, DANIEL STREET ADDRESS: 9401 EVERGREEN PL. #101 CITY-ST-ZIP: FT. LAUDERDALE FL 33324	[ ] Change [ ] Addition
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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DB Daniel Bulzacchelli 5-1-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0237767 CP