Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90037 034 ***150.00

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9300065502

1. Corporation Name

ALL AMERICAN WORLD SUPPLY COMPANY

Principal Place of Business Mailing Address						3 1001/1001 HD 10:00 HHV 00HH 00HH 00HH 00HH 0HH 0HH 0HH 0
9820 S.W. 120TH ST.			9820 S.W. 120TH ST.			
MIAMI FL 33176		MIAMI FL 33	MIAMI FL 33176			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						09/21/1993
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
<u>-</u>			and road oo			65-0433352 Not Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.			\$8.75 Additional
22 27			, ••••			5. Certificate of Status Desired Fee Required
			City & State			6. Election Campaign Financing \$5.00 May Be
23	-	28				Trust Fund Contribution Added to Fees
Zip Country Zip		Country		,	8. This corporation owes the current year Intangible	
24	25 29 30				Personal Property Tax.	
	g. Name and Address of Curre					10. Name and Address of New Registered Agent
				81	Name	
WITLIN, BARRY E				02	Ctroot A	Advece (D.O. Box Number in Not Accordable)
2800 BISCAYNE BLVD.				82	Street A	Address (P.O. Box Number is Not Acceptable)
STE.	900			83	<u> </u>	
MAIM	AI FL 33137				<u> </u>	
		•		84	City	FL 85 Zip Code
44 Purcuant	to the provisions of Sections 607.05	502 and 607.1508.	Florida Statutes.	he abov	e-named c	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State	e of Florida, Such	change was author	rized by	the corpor	ration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of Section	607.0505, Florida	Statutes	٠,	2/29/98
SIGNATURE	Signature, typed or pinted name of registered ag	and the state of t	(NOTE: Per	ictored Ana	nt signature reg	quired when reinstating) DATE
12.		ND DIRECTORS	(NOTE: Neg	13.	ik orginataro rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE	,	Change Addition
NAME	GUIDO, FRANK			1.2 NAME	1	
	901 TIMBER LANE				T ADDRESS	
STREET ADDRESS				1.4 CITY-S		
CITY-ST-ZIP			2.1 TITLE	11-215	☐ Change ☐ Addition	
	P NOUDIN DIANE			2.2 NAME		***
-NAME .	moonin, brac			TADDRESS		
STREET ADDRESS	t .				- 1	
CITY-ST-ZIP	MIAMI FL 33176		DELETE	2.4 CITY-	51-ZIP	Change Addition
TITLE				3.1 TITLE		
NAME				3.2 NAME		,
STREET ADDRESS					TADDRESS	
CITY-ST-ZIP				3.4. CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE	4.1 TITLE		C Clarige C Addition
NAME				4. 2 NAME		
STREET ADDRESS		•		4.3 STREE	T ADDRESS	
CITY-ST-ZIP				4.4 CITY-5	T-ZIP	
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME 55.5				5.2 NAME		
STREET ADDRESS				5.3 STREE	TADDRESS	
CITY-ST-ZIP				5.4 CITY- S	T-ZIP	
TITLE .	[· · · · · · · · · · · · · · · · · · ·		☐ DELETE	6.1 TITLE	İ	☐ Change ☐ Addition
l					1	
NAME	· ·			6.2 NAME		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(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 with all otherwise into order.

6.4 CITY-ST-ZIP

SIGNATURE: