

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94000014674 (3)
 1. Corporation Name
A-ALL CUSTOM SHELVING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **3951 MERCANTILE UNIT C NAPLES FL 33942 US**

Mailing Address: **P.O. BOX 9183 NAPLES FL 34104 US**

3. Date Incorporated or Qualified: **02/23/1994**

4. FEI Number: **65-0478127**

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21. **10932 K-Nine Dr.**

22. **BONITA SPRINGS FL**

23. **34135**

24. **U.S.A.**

25. **U.S.A.**

26. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

28. City & State

29. City & State

30. Country

9. Name and Address of Current Registered Agent

IRVING, BRADLEY
3951 MERCANTILE AVE
UNIT C
NAPLES FL 34104

10. Name and Address of New Registered Agent

81. Name

82. 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 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: *Irving Bradley*

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADLEY, IRVING	1.2 NAME	
STREET ADDRESS	3951 MERCANTILE AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 34104	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	APRICIO, VICTOR	2.2 NAME	
STREET ADDRESS	3451 MERCANTILE RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33942	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOPEZ, JOSE	3.2 NAME	
STREET ADDRESS	3951 MERCANTILE RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33942	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

VP	JORGE CABRERA
10932 K-Nine Dr.	
BONITA SPRINGS, FL 34135	

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.

SIGNATURE: *Irving Bradley*

CR2E034 (10/97)