

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000064603

Entity Name: ALL ONE RESPIRATORY, INC.

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

621 NW 70TH TER  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

621 NW 70TH TER  
PLANTATION, FL 33317 US

**New Mailing Address:**

FEI Number: 65-0517351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FREDA, JAMES P  
621 NW 70 TERR.  
PLANTATION, FL 33317 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FREDA, AYCEL  
Address: 621 NW 70TH TERR.  
City-St-Zip: PLANTATION, FL 33317

Title: P  
Name: FREDA, JAMES P  
Address: 621 NW 70TH TERR.  
City-St-Zip: PLANTATION, FL 33317

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: JAMES FREDA

PRES

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date