

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # P94000074188

95 JUN 22 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
ALL SURFACES UNLIMITED, INC.

Principal Place of Business: 5900 NW 40th LANE, COCONUT CREEK, FL. 33073
Mailing Address: 6574 N. STATE ROAD 7, #119, COCONUT CREEK, FL. 33073

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		2a		10/05/94		N/A	
22		27		4. FEI Number		Applied For	
City & State		City & State		65-0529302		Not Applicable	
23		28		5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Country		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24		25		29		30	
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LARRY E. COLE 636 SW 14th TERRACE FORT LAUDERDALE, FL. 33312				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

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 _____ (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PRESIDENT/DIRECTOR	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	RICHARD G. PATTERSON, JR.	1 2 NAME					
STREET ADDRESS	5900 NW 40th LANE	1 3 STREET ADDRESS		900001524819			
CITY - ST - ZIP	COCONUT CREEK, FL. 33073	1 4 CITY - ST - ZIP		-06/27/95--01097--006			
TITLE	SECRETARY/DIRECTOR	2 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	*****225.00 *****225.00			
NAME	LARRY E. COLE	2 2 NAME					
STREET ADDRESS	636 SW 14th TERRACE	2 3 STREET ADDRESS					
CITY - ST - ZIP	FORT LAUDERDALE, FL. 33312	2 4 CITY - ST - ZIP					
TITLE		3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		3 2 NAME					
STREET ADDRESS		3 3 STREET ADDRESS		900001524819			
CITY - ST - ZIP		3 4 CITY - ST - ZIP		-06/27/95--01097--007			
TITLE		4 1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	*****9.75 *****9.75			
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					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard G. Patterson 05/31/95 (305) 427-2288
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: RICHARD G. PATTERSON, JR.
 Date: 05/31/95 (Daytime) (Area)