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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

APPROVED AND

1997 JUL 15. AM 9: 27

SECRETARY OF STATE

DOCUMENT # (2950000 (417) All excellence detailing, inc.				MELANASSEE,	r LORIDA
Principal Place of Business Mailing Address					
		- 4 to - 1000		· .	
937	73 W. Sample Rd S	Suite 203 S	ame.	i	
Cor	cal Springs, Fl	33000		3. Date Incorporated or Qualified 3	a. Date of Last Report
				01/06/1995	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21					Not Applicable
L *****		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		City & State		6. Election Campaign Financing	Fee Required
 		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Ζιρ	Country	8. This corporation has liability for intan	
24	25	29	30	Florida Statutes	
<u> </u>	9. Name and Address of Curre	nt Registered Agent	01 1000	10. Name and Address of New Registe	ered Agent
Angel Navedo 4624 SW 28 Ave.			82 Street Add	Angel Navedo co/ NE Realty Corp. Address (P.O. Box Number is Not Acceptable) 373 W. Sample Rd.	
Ft	. Lauderdale FL	33312	83 Sui	te 203	,
			84 City	ral Springs, MA 133	FL 85 Zucc 665
11. Pursuani	t to the provisions of Sections 607.050	02 and 607.1508, Florida State	utes, the above-named cor	poration submits this statement for the purpo	ose of changing its registered
agent. I	// D / /	1	Florida Statutes.	ation's board of directors. I hereby accept the	a appointment as registered
	Signature, typed or printed name of registered ap-		OTE: Registered Agent signature requ		ATE
12.	OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
NAME	Bresident	☐ pereis	1.1 TITLE 1.2 NAME	\mathbf{a} anna \mathbf{a} a	392691
STREET ADDRESS	Angel L. Navedo		1.3 STREET ADORESS		701049004
CITY-ST-ZIP	4624 SW 28 Ave.		1.4 CITY-ST-ZIP		00 ****165.00
TITLE	For Lauderdale,	F1 333 POELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		1
STREET ADDRESS			2.3 STREET ADDRESS		İ
CITY - ST - ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		}
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS					
	f		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
CITY-S1-ZIP TITLE		☐ DELETE			Change Addition
		☐ DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE NAME* STREET ADDRESS CITY-ST-ZIP		-	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		
TITLE NAME* STREET ADDRESS CITY-ST-71P TITLE*		DELETE	44 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change
TITLE NAME* STREET ADDRESS CITY-ST-ZIP TITLE* NAME		-	4 4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE 6 2 NAME		
TITLE NAME* STREET ADDRESS CITY-ST-71P TITLE*		-	44 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		

I do 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.