



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000013114 1. Entity Name ALL-TECH CO., INC.	
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Principal Place of Business 26 BRIDGETTE BLVD LAKE WORTH, FL 33463 US	Mailing Address 26 BRIDGETTE BLVD LAKE WORTH, FL 33463 US
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DO NOT WRITE IN THIS SPACE

FILED
2008 Oct-2 PM 4:30
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

09042008 No Chg-P CR2E034 (11/05)
4. FEI Number **65-0570086** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent CROSS, KEVIN R E A 801 SOUTH FEDERAL HWY HOLLYWOOD, FL 33020	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STREPEK, RICHARD J 26 BRIDGETTE BLVD LAKE WORTH, FL 33463
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE Richard J. Strepek **9-04-08 (561) 966-4840**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #