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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P95000044401 (4)

ALLSHEETS, INC.

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

## **FILED** May 11 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		T P RODANDER RIQ ABION DERNI DURNI DURNI DURNI DURNI DURNI DURNI DURNI DURNI	LESI MINII NINII NEINI IINI INDI INDI
11124 JACQUELINE AVENUE 11124 JACQUELINE AVENUE ENGLEWOOD FL 34224 ENGLEWOOD FL 34224			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 06/01/1995	
2. Principal Place of Business 21 14036 Colonial Grant Bird	2a. Mailing Address 26 14036 Colonial Gra	nd Bid	4. FEI Number 65-0594848	Applied For Not Applicat
Suite, Apt. #, etc. 22 \$10	Suite Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23 Orlando FL	City & State  Orlando FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 25	29 32837 30	untry	This corporation owes or has paid the corporation owes.  Output  Description of the corporation owes or has paid the corporation owes.  Output  Description of the corporation owes or has paid the corporation owes.	Yes No
9. Name and Address of Current Registered Agent		1	10. Name and Address of New Registered Agent	
ELKIN, BUD		81 Nage	EKIN	
11124 JACQUELINE AVENUE ENGLEWOOD FL 34224		82 Street Addre	ss (P.O. Box Number is Not Acceptable) Colonial (Tana Biva 8	'ID
-		83		

11. Pureuant to the provisions of Soctions 607.050e 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 purpose of changing its registered agent. I am familiar with any target of or section 607.0505, Florida Statutes.

SIGNATURE ed name of registered agent and title it applicable (NOTE: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE Ď **ELKIN, BUD** NAME 1.2 NAME 1.3 STREET ADDRESS 11124 JACQUELINE AVENUE STREET ADDRESS **ENGLEWOOD FL 34224** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE \_\_\_ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition

6.4 CITY - ST - ZIP 14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attackment with an address. Block 12 or Block 13 if changed, or on an all

51 TITLE

5.2 NAME **5.3 STREET ADDRESS** 

6.1 TITLE 6.2 NAME

DELETE

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

12 ... 12 1/ ...

K-1-00

Addition