FILED Jul 22, 2002 8:00 am Secretary of State 07-04-2002 90548 043 ***150.00

FOR PROFIT CORPORATION

OMILOKIM BOSIMESS KELOKI (ORK)								
DOCUMENT # P95000061151 1. Entity Name								
ALL CABLING SOLUTIONS, INC.							ı	
DO NOT WRITE IN THIS SP						_ 391	7	
2. Principal Place of Business 3. Mailing Address				15 1 12 15 15 15 15 15 15 15 15 15 15 15 15 15	25-23-20-20-20-20-20-20-20-20-20-20-20-20-20-	1		
100 Starport Way, Bldg.4 100 Starport				rt Way,	Bldq. 4		1	
Suite, Apt.		Suite, Apt. #, etc. Building	#4		DO NOT WRITE IN THIS SPACE			
City & State			City & State			4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
Sanford, FL			Sanford, PL			59-323631	<u> </u>	Not Applicable
327	Zip Country USA		32773	Country USA	<u> </u>	5. Certificate of Status Desired		.75 Additional Required
					7. Name and Address of Current Registered Agent Name Michael K. Harrison Street Address (P.O. Box Number is Not Acceptable) 100 Starport Way, Blog. 4			
	No. 1 and 5 of Street Com-	NOT WE						
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R The above	named entity sub	mits this statement for t	the number of changing	its registered	Sanford	and accord or both in the State of E		321/3
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.								
SIGNATURE Signature, typed or printed name of registered agont and title if applicable. (NOTE: Registered Agent signature required when reliminating) DATE								
9. This corporation is eligible to satisfy its intengible Tax fifting requirement and elects to do so. (See criteria on back) January 1: May After May: Amended: Make Check Payable					550.00 61.25			\$5.00 May Be Added to Fees
11.		OFFICERS AND D	RECTORS	18.45				ensing the first of a morning of Acres
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STREET ADDRESS CITY-ST-7/P				STREET A	1 (4) (4) (4) (4) (4) (4) (4) (4			
	ertify that the infor	mation supplied with th	is filling does not qualify	28.5 at 12.				at the information
13. 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 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 11 or on an attachment with an address, with all other like empowered.								
SIGNATURE: 18-02 407-302-2210								
	81G	NATURE AND TYPED OR PRIN	ITED NĂME OF SIGHING OFFICI	ER OR DIRECTOR		Date	Carytime	Phone #

Attachment
124 127

Inc. 39127



All Cabling Solutions, Inc.

"Connecting Your Business World"

100 Starport Way • Suite 4 • Sanford, Florida 32773

OFFICE 407-302-2210 • FAX 407-302-8296

EIN-# 59-3236931

June 27, 2002

To Whom It May Concern,

Please accept the 2001 Uniform Business Report enclosed as timely filed, along with our check for \$150.00. We have also enclosed the 2002 Uniform Business Report with payment for \$150.00.

We never received the form. In communication from our accountant, we became aware that there was a filing requirement. We immediately called the Division of Corporations and it was then that we became aware that the address was wrong and we never received the forms or dissolution forms. Per your office instructions, we have filled out the UBR form and enclosed the original filing fees totaling \$ 150.00.

Thank you,

Michael K. Harrison-

President