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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070724 (6)

ALLJAY, INC.

Principal Place of Business

Mailing Address

911 8, 58TH AVENUE HOLLYWOOD FL 33021 911 S. 58TH AVENUE HOLLYWOOD FL 33021

## FILED Apr 16 1997 8:00am Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report

4.1					09/11/1995	08/2	3/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 65-0617901 Applied For		plied For	
21		26			APPLIED FOR		No	ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State		City & State							
23		28			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t		
Zip	Country	Z(D)	Country		This corporation has liability for a second control of the se				
24	25	29	30	,		Yes		199.032,	
-71	9. Name and Address of Current		1001		10. Name and Address of New Re				
PIERCE, CLIFFORD Y CPA				Name					
1440 JOHN F. KENNEDY CAUSEWAY STE 301				Discot As	Need Address (C.O. Day Murch et in Not Appendable)				
NO. BAY VILLAGE FL 33141			82	Shoot Ad	Street Address (P.O. Box Number is Not Acceptable)				
			83	1					
						<u>.</u> .			
			84	City		FL	85 Zip 0	Dode	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	os, the abov	re-named co	orporation submits this statement for the p	urpose of	changing it	s registered	
office or r	egistered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was a	authorized b	y the corpo	ration's board of directors. I hereby accep	it the appo	intment as	registered	
SIGNATURE	and the state of t		onida charato						
	Signature, typed or printed name of registered agent			on arulangia Ina	quired when reinstaling)	DATE	DIDECTOR		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		Change	<del> </del>	
TITLE	AAAAAAAAA CAAAA	L_3 Diccit	- 1	}		L	Change	☐ Addition [ g	
NAME	MALAMUD, CARY 19232 S.W. 3RD COURT		1.2 NAME						
STREET ADDRESS		1		T ADDRESS				Ţį	
CITY-ST-ZIP TITLE	PEMBROKE PINES FL 33029 ST	DELETE	1.4 CiTY -	ST-ZIP			Change	Addition	
NAME	CAIAZZO, JOSEPH	peece	2.2 NAME				Onling¢	, Addition	
STREET ADDRESS	15301 S.W. 31ST COURT			* +0000000					
	DAVIE FL 33331			T ADDRESS					
CITY-ST-ZIP TITLE	DAVIE PE 33331	DELETE	2. 4 CITY - 3.1 TITLE	51-21			Change	Addition	
NAME			3.2 NAME				ontings		
STREET ADDRESS				F ADDRESS				<b>\</b>	
C/TY-ST-ZIP			3.4, CITY-						
TITLE		DELETE	4,1 Till£	31.50			Change	Addition	
NAME			4. 2 NAME	1		•		_	
STREET ADDRESS				ADDRESS				İ	
CITY-ST-ZIP			4.4 CHY-	- I				}	
TITLE		DELETE	5.1 7H LF				Change	Addition	
NAME			5.2 NAME	1			-	}	
STREET ADDRESS				T ADDRESS	* • • • •				
CITY-ST-ZIP			5.4 CITY-5	1				1	
TITLE		☐ DELETE	6.1 TITLE				Change	Addition	
NAME			6.2 NAME		•				
STREET ADDRESS			6.3 STREET	ADDRESS				1	
CITY-ST-ZIP			6.4 CITY - S						
14. I do herek	by certify that the information supplied	with this filing does not quali	fy for the exe	emption stat	ed in Section 119.07(3)(i), Florida Statules	s. I further	certify that f	ihe	
informatio	n indicated on this annual report or su	ppiemental annual report is t	rue <b>y</b> nd acc	urate and th	at my signature shall have the same lega	effect as	it made und	ier oath; that	