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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000074426

Principal Place of Business

ALL AMERICAN BADGE COMPANY, INC.

120 N.W. 207TH WAY PEMBROKE PINES FL 33029 US		9650 SW 16TH CT PEMBROKE PINES FL 33025 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/27/1995		
		On Mariling Address			4. FEI Number	Applied For	
2. Principal Pl	2a. Mailing Address	Address		65-0614234	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangil		
24	25	29 31	0		Personal Property Tax.		
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered Age	11	
TAN	DEO, PATRICIA P		01	Name			
9650 S.W. 16TH COURT			82	2 Street Address (P.O. Box Number is Not Acceptable)			
PEM		83		A COMPANY OF THE PROPERTY OF T	<u>ロイトは、44、44から 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 </u>		
Chibitotte i ittes t a social							
			84	City	F) 8	5 Zip Code	
agent. I a	m familiar with, and accept the obligation	itions of, Section 607.0505, Florid	ia Statutes		oration's board of directors: I hereby accept the appointment		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	DP	☐ DELETE	1.1 TITLE		Li	Change Addition	
NAME	TADDEO, PATRICIA P		1.2 NAME				
STREET ADDRESS	9650 S.W. 16TH COURT		1.3 STREE	1			
CITY-ST-ZIP	PEMBROKE PINES FL 33025	☐ DELETE	1.4 CITY-S	T-ZIP		Change Addition	
TITLE	ST ANTHONY D	☐ DEFE IE	2.1 TITLE			, initial initia initial initial initial initial initial initial initial initi	
NAME	TADDEO, ANTHONY R 9650 S.W. 16TH COURT		2.2 NAME	F ADDDESS		. •	
STREET ADDRESS	PEMBROKE PINES FL 33025		2.3 STREET 2. 4 CITY-S				
CITY-ST-ZIP	V	DELETE	3.1 TITLE	1-21	i i	Change	
NAMÉ	TADDEO, FRANK A		3.2 NAME				
STREET ADDRESS	9650 S.W. 16TH COURT		3.3 STREE	TADDRESS	the state of the s	and the state of t	
CITY-ST-ZIP	PEMBROKE PINES FL 33025		3.4. CITY-5	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME	•		4. 2 NAME		·		
STREET ADDRESS			4.3 STREE	TADDRESS		Į	
CiTY-ST-ZIP			4.4 CITY-S	T-ZIP	,	O 144%	
TITLE		☐ DELETE	5.1 TITLE	.		Change C Addition	
NAME			5.2 NAME	T ADDRESS			
STREET ADDRESS			5.3 STREE 5.4 CITY-S	- 1		•	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE)-ZIF	· · · · · · · · · · · · · · · · · · ·	Change	
TITLE			6.2 NAME			J-,	
NAME STREET ADDRESS				TADORESS			
SIRCE AUDKESS	t .			- 1	1		

6.4 CITY-ST-ZIP

FILED Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90069 028 ***150.00



14. I 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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP