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

CORPORATION ANNUAL REPORT

1998

TITLE NAME

STREET ADDRESS

officer or director of Block 12 or Block

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 14 1998 8:00am

Secretary of State

☐ Change

(813)626-

4/28/08

Addition

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000076800 (8)

ALL AMERICAN HOUSING, INC.

Principal Place of Business Mailing Address 209 GORNTO LAKE ROAD 209 GORNTO LAKE ROAD BRANDON FL 33510 BRANDON FL 33510 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/06/1995 2a. Mailing Address 4, FEI Number 2. Principal Place of Business Applied For 59-3346207 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Ζiρ Country Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ZEPKA, DOUGLAS 209 GORNTO LAKE ROAD Street Address (P.O. Box Number is Not Acceptable) **BRANDON FL 33510** 83 **B4** Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. __ DELETE Change Addition 1.1 TITLE TITLE ARRIGO, RONALD V NAME 1.2 NAME 3930 SEIXAS PLACE STREET ADDRESS 1.3 STREET ADDRESS LAND O'LAKES FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DEL ETE TITLE 2.1 TITLE **ZEPKA, DOUGLAS** 2.2 NAME NAME 209 GORNTO LAKE RD STREET ADDRESS 2.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 2. 4 CITY - ST- ZIP Change Addition DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP Addition ___ DELETE Change 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS DITY-ST-7IP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-7IP

DELETE

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-S1-ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this argund report or appropriate annual report is true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation of the rejeiver of justice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in