SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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PROFIT CORPORATION ANNUAL REPORT

1999

TITLE

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90002 021 ***150.00

___ Change ___ Addition

305.770-1680

DOCUMENT # P96000032562

ALL RESIDENTIAL REMODELING & FINANCING, INC.

Principal Plac	e or Business	Maning Address			
3530 MYSTIC F	PT. DRIVE	3530 MYSTIC PT. DRIVE			
1006	NL EL 20100	1006 NORTH MIAMI REACH EL 33	90	DO NOT MOITE IN THIS	SDACE
N. MIAMI BEACH FL 33180 US		NORTH MIAMI BEACH FL 33	o v	DO NOT WRITE IN THIS	STACE
00		00		3. Date Incorporated or Qualified 04/15/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0718264	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Žip	Country	Zip	Country	8. This corporation owes the current year _	
!	25	29	o	Intangible Personal Property.	Yes No
	9. Name and Address of Curre	ent Registered Agent	<u>' </u>	10. Name and Address of New Registered	Agent
		-	81 Name		
	LF, SAUL		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
3530 MYSTIC PT. DRIVE			Joe Street Ac	ratess (1.0. box Halliber is Hot / toochable)	
1006			83		<u> </u>
N. MIAMI BEACH FL 33180					as Zin Code
			84 City	FL	85 Zip Code
SIGNATURE 12.	Signature, typed or printed name of registered a	gent and title if applicable. (NOTI	: Registered Agent signature i	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	WOLF, SAUL		1.2 NAME		
STREET ADDRESS	3530 MYSTIC PT. DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI BEACH FL 33180		1.4 CITY-ST-ZIP		
TITLE	İ	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS		و تشور تا بيد بيد	2.3 STREET ADDRESS	The state of the s	بعبد - ۱۰ مار باید ای <u>ندستایزمهای</u> ادین
CITY-ST-ZIP	<u> </u>		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Additio
NAME			5.2 NAME		
			5.2 IVAME		
STREET ADDRESS			5.3 STREET ADDRESS		

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

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 changed or on an attachment with an address.

6.4 CITY-ST-ZIP

DELETE

To Whom it may concern 588487-90002-21

Tenencing cluc. Received a 2nd notice on June 30,1999 but never received a remember to renew our Corporation, I deeply apoliging for this over sight and please occept my check for \$150. Sony again this will never happen again.

Thank your

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Saul Wolf, Resolut

7/8/99

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