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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

199	i
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DORINAN NIDOGOK

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90130 013 \*\*\*158.75

1. Corporation Name					
All American Group, INC.					
7					
Principal P ace of Business Mailing Address	8th COURT				
2300 S.E. 8 Th COURT 2300 SE					
Pompano Beach, FL Pompano	Beach, FL	DO NOT WRITE IN THE	S SPACE		
33062	330h				1
		01-08-1998	_		
2. Principa Place of Business  2a. Mailing Address	8th COURT	4. FEI Number		lied For	
21 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8 COURT	b5-080 34105		Applicable	
Suite, Apt. #, etc.  22  Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b> A Fee Rea		
City & State C City & State		6. Election Campaign Financing	\$5.00		
23 Pompano DeAch, FL 28 Pompano	Beach, FL.	Trust Fund Contribution	Added to	, 1	
Zip: County Zip	Country	8. This corporation owes the current year l			
	0 0.5.4	Person a) Property Tax.		[]No	
9. Name and Address of Current Registered Agent	81 Name	10. Name and Address of New Registere	Agent		
Amerikawter		N/A			
343 Almeria Avenue	82 Street Addre	ess (P.O. Box Number if Not Acceptable)			
Coral Gubles, FL. 33134	83				
CORAC GROSCO, 7 23 134	84 City		05 7m C	- do	
33/37	84 City	Fì	85   Zip C	cae	
11. Pursuar t to the provisions of Sections 607.0502 and 607.1508, Florida Statut as office or registered agent, or both, in the State of Florida. Such change was a st	, the above-named corporation	pration submits this statement for the purpose on's heard of directors. I hereby accept the appropriate the ap	f changing its	registered	
		it's board of directors. Thereby decept the appr	manent as reg	in torou	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid	la Statutes.				
SIGNATURE					
SIGNATURE:  Signature, typed or printed name of registered agent and title if applicable. (NOTE R	egistered Agent signature required		ND DIRECTOR		(80)
SIGNATURE		when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	R § IN 12	(11/08)
SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. ()FFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FORDMAN	egistered Agent signature required				34 (11/98)
SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. ()FFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURBMAN  STREET ADDRESS RISO W. MC Nab # 101	egistered Agent signature required				E034 (11/08)
SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. ()FFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FOLDEMAN  STREET ADDRES: 8150 W. MC Nab # 101  CITY-ST-ZIP TAMARAC FL. 33331	egistered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP		☐ Change	☐ Addition	P2E034 (11/08)
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. ()FFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FOLDEMAN  STREET ADDRES: 8150 W. MC Nab # 101  CITY-ST-ZIP TAMARAC FL. 3333  TITLE VICE PRESTDENT DELETE	egistered Agent signature required  13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 21 TITLE				CR2E034 (11/98)
SIGNATURE:  Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. ()FFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FORDMAN  STREET ADDRESS; 8150 W. MCNab # 101  CITY-ST-ZIP TAMARAC FL. 33331  TITLE VICE PRESIDENT DELETE  NAME ZOAN SWANGAN	egistered Agent signature required  13.  1.1 TITLE  1 2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  2.2 NAME		☐ Change	☐ Addition	CB2E034 (11/98)
SIGNATURE:  Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. (OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURDMAN  STREET ADDRES: 8150 W. MCNab # 101  CITY-ST-ZIP TAMARAC FL. 3333  TITLE VICE PRESTDENT DELETE  NAME ROAN SWANGANS  STREET ADDRES: 3300 SE 8 # COURT	13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS		☐ Change	☐ Addition	CB2E034 (11/98)
SIGNATURE:  Signature, typed or printed name of registered agent and title if applicable.  (NOTE R  12. OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURDMAN  STREET ADDRES:  8150 W. MCNab # 101  TITLE VICE PRESIDENT DELETE  NAME  NAME  STREET ADDRES:  STREET ADDRES:  STREET ADDRES:  STREET ADDRES:  ON SWAN GAN  STREET ADDRES:  ON SE 8 # COURT  CITY-ST-ZIP POMPANO BEACH, PL 33062	egistered Agent signature required  13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change	☐ Addition	CR2E034 (11/98)
SIGNATURE:  Signature, typed or printed name of registered agent a dittle if applicable. (NOTE R  12. (OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURBMAN # 101  STREET ADDRES: 8150 W. MC Nab # 101  CITY-ST-ZIP TAMARAC FL. 33331  TITLE VICE - PRESIDENT DELETE  NAME SOAN SWANGARY  STREET ADDRES: 0300 SE 8 # COURT  STREET ADDRES: OF PRANO BEACH, PL 33062  TITLE DISCRETARY DELETE	egistered Agent signature required  13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change	☐ Addition	CP2E034 (11/98)
SIGNATURE:  Signature, typed or printed name of registered agent and title if applicable. (NOTE R  12. OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURDMAN  STREET ADDRESS; 8150 W. MCNab # 101  TITLE VICE PRESTDENT DELETE  NAME SOAN SWANGAN  STREET ADDRESS; 2300 SE 8 # COURT  CITY-ST-ZIP POMPANO BEACH, PL 33062  TITLE DELETE  NAME SOON SUCCESSORY  TITLE DELETE  NAME TOAN SWANGAN  STREET ADDRESS; 2300 SE 8 # COURT  NAME TOAN SWANGAN  STREET ADDRESS; 2300 SE 8 # COURT  NAME TOAN SWANGAN  STREET ADDRESS; 2300 SE 8 # COURT  NAME TOAN SWANGAN  STREET ADDRESS; 2300 SE 8 # COURT	egistered Agent signature required  13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change	☐ Addition	(PDE034 (11/98)
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SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE R. 12. (OFFICERS AND DIRECTORS)  TITLE PRESTIDENT DELETE  NAME ROSLUN FURDMAN # 101  STREET ADDRESS: 8150 W. MC Nab # 101  TITLE VICE PRESTIDENT DELETE  NAME ROSLUN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE JECRETARY DELETE  NAME TOAN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE JECRETARY DELETE  NAME TOAN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE TOAN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE TOAN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE TOAN SWANINGAN  STREET ADDRESS: 0300 SE 8 COURT  TITLE TREASURES DELETE  NAME ROSLYN FORDMAN # 101	13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4 1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition	(11/08)
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE R  12. (OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FREDMAN # 101  STREET ADDRESS; 8150 W. MC Nab # 101  TITLE VICE PRESIDENT DELETE  NAME SOAN SWAN, GAIN  STREET ADDRESS; 0300 SE 8 # COURT  CITY-ST-ZIP POMPANO BEACH, PL 33062  TITLE JECRETARY DELETE  NAME TOAN SLUCK, GAIN  STREET ADDRESS; 0300 SE 8 # COURT  TITLE DELETE  NAME TOAN SLUCK, GAIN  STREET ADDRESS; 0300 SE 8 # COURT  TITLE TOAN SLUCK, GAIN  STREET ADDRESS; 0300 SE 8 # COURT  TITLE TOAN SLUCK, GAIN  STREET ADDRESS; 0300 SE 8 # COURT  TITLE REASURES DEACH, PL 330621  TITLE REASURES DEACH PL 30621  TITLE ROSLYN FARBMAN  STREET ADDRESS; 8150 W. MCNAL # 101  CITY-ST-ZIP TAYMARAC, PL. 33337	egistered Agent signature required  13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 41 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change ☐ Change ☐ Change	Addition Addition Addition	(PD)E034 (11/08)
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SIGNATURE:  Signature, typed or printed name of registered agent a id title if applicable. (NOTE R  12. (OFFICERS AND DIRECTORS  TITLE PRESTDENT DELETE  NAME ROSLYN FURDMAN # 101  STREET ADDRESS; 8150 W. MC Nab # 101  TITLE VICE PRESIDENT DELETE  NAME JOAN SWAN, GAN  STREET ADDRESS; OOD SE 87 COURT  TITLE JECRETARY DELETE  NAME JOAN SULLIN, GAN  STREET ADDRESS; OO SE 87 COURT  TITLE JECRETARY DELETE  NAME JOAN SULLIN, GAN  STREET ADDRESS; OO SE 87 COURT  TITLE TREASURES; OF ARBORAN  STREET ADDRESS; OF ARBORAN  STREET ADDRESS; OF ARBORAN  STREET ADDRESS; 8150 W. MCNAB # 101  CITY-ST-ZIP TAYMARAC, FL. 3333    TITLE ROSLYN FARDMAN  STREET ADDRESS; 8150 W. MCNAB # 101  CITY-ST-ZIP TAYMARAC, FL. 3333    TITLE ROSLYN FARDMAN  STREET ADDRESS; 8150 W. MCNAB # 101  CITY-ST-ZIP TAYMARAC, FL. 3333    DELETE  NAME  STREET ADDRESS	egistered Agent signature required  13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 41 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 51 TITLE 52 NAME		☐ Change ☐ Change ☐ Change	Addition Addition Addition	CR2E034 (11/08)
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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 uffrector of the corporation or the receiver or trusted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attack with an address, with all other like empowered.

SIGNATURE:

DE DRUITED NAME OF SIGNING OFFICE ON DIRECTOR VICE - PRES