2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 01, 2000 8:00 am
Secretary of State
05-12-2000 90056 005 ***150.00

DOCUMENT # P99000024983

1. Entity Name
All Records, Corp.

Principal Place of Business	Mailing Address
3900 NW 79 AVE. Suite 482 Miami, FL 33166	7719 NW 48 ST Suite 320 Miami, FL 33166.

2. Changed Principal Place of Business / 3. Changed Mailing Address

Suite, Apt. #, etc. / Suite, Apt. #, etc.

City & State / City & State

Zip / Country / Zip / Country

[redacted]

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0904300 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Ciroluan Calderon 3900 NW 79 AVE. Suite 482 Miami, FL 33166	Name: Antonio Calderon Street Address (P.O. Box Number is Not Acceptable): 7719 NW 48 ST Suite 320 City: Miami FL Zip Code: 33166.

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: [signature] DATE: 4-24-00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW! FEE IS $150.00
After MAY 1, 2000 Fee Will Be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE PD NAME ANTONIO CALDERON STREET ADDRESS 3900 NW 79 AVE Suite 482 CITY-ST-ZIP Miami, FL 33166. ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
TITLE VPD NAME Ciroluan Calderon STREET ADDRESS 3900 NW 79 AVE Suite 482 CITY-ST-ZIP Miami, FL 33166. ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
TITLE SD NAME Ana de Calderon STREET ADDRESS 3900 NW 79 AVE Suite 482 CITY-ST-ZIP Miami, FL 33166. ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
TITLE TD NAME Anly Calderon STREET ADDRESS 3900 NW 79 AVE Suite 482 CITY-ST-ZIP Miami, FL 33166 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4-24-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #