DOCUMENT # S71818 ALL STATE BALL BONDS, INC.  Principal Place of Business ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE BALL BONDS, INC.  Principal Place OF BUSINESS ALL STATE B	SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: PROFIT CORPORATION ANNUAL REPORT 1999				Jul 27, 1999 8:00 an		
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Zip       Country       Zip       Country       I. This counts he current year       Yes       No         3       30       30       30       10. None and Address of Current Registered Agent       10. None and Address of New Registered Agent         GREEN, BRUCE T.       600 S. ANDREWS AKE.       51       None       52       72       72       60       52       72       72       60       52       73       73       73       73       73       73       73       73       73       73       74       74       74       74       74       74       74       74       74       74       74       74 <td< td=""><td colspan="2">••••</td><td></td><td></td><td></td><td></td></td<>	••••						
B. Name and Address of Current Registered Agent     B. Name and Address of New Registered Agent     GetEn, BRUCE T,     Got S, ANDREWS AVE.     STE: 400     FT. LAUDERDALE FL 33301     B     Street Address (P.O. Box Number is Not Acceptable)     STE: 400     FT. LAUDERDALE FL 33301     B     Cory     FL (a) DECOMPTONIC Solution and address of New Registered Agent     STE address of Decompton Solution and Address (P.O. Box Number is Not Acceptable)     STE address of Solution and Address (P.O. Box Number is Not Acceptable)     STE address of Solution and Address of New Registered Agent     STE address of Solution and	Zip		Zip		8. This corporation owes the curr	ent year	
GREEN, BRUCE T. 600 S. ANDREWS AVE. STE: 400 FT. LAUDERDALE FL 33301     81     Name       11. Pursuent to the provision a device St07 4502 and 607 4504. Provide Statutes, the above named corporation submits this datement for the purpose of changing its registered agent. Tam familiar with, and accept the obligations of social on 607 0505. Provide Statutes, the above named corporation submits this datement for the purpose of changing its registered agent. Tam familiar with, and accept the obligation of social on 607 0505. Provide Statutes, the above named corporation submits this datement for the purpose of changing its registered agent. Tam familiar with, and accept the obligation of social on 607 0505. Provide Statutes.       SIGNATURE     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.       12.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.       13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.     Change     Addition       14.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.     Change       14.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES CO OFFICERS AND DIRECTORS IN 12.     Change     Addition       17.     MALER, BARBARA     III III III IIII IIII IIII IIIIIIIIII	24			30			
600 S. ANDERNS AVE.       Street Address (P.O. Box Number is Not Acceptable)         81       B1         94       City         95       City         95       City         95       City         96       City         97       City         97 <t< td=""><td colspan="4">81 Name</td><td>**************************************</td><td></td><td>] =</td></t<>	81 Name				**************************************		] =
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Bit       City       FL       85       Zp Code         11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation sbaard of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objections of section 607,0502, Florida Statutes.       End of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objections.       Interpretation of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objections.       Interpretation of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objection.       Interpretation.         SIGNATURE       OFFICERS AND DIRECTORS       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         12.       OFFICERS AND DIRECTORS       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.       2.3 WME       2.3 WME         3300 HE 191 ST / STE - 803       13.       Change       Addition         NME       DELETE       2.1 TITLE       Change       Addition         NME       2.3 STREET ADDRESS       2.3 STREET ADDRESS       Change       Addition         NME       DELETE       3.1 TITLE       Change       Addition         NME       DELETE       3.1 TITLE       C							
Image: Sections B07 0502 and 807 1508. Florida Statutes, the above-marked corporation submits this statement for the purpose of changing las 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, 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, and accept the obligations of, section 607 0505, Photod Statutes.         SIGNATURE       Image:	FT. L	AUDERDALE FL 33301		84 City		85 Zin Code	
office or registered agent, or both, in the State of Florida. Stuch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the objection 507.5050, Florida Statutes.         SIGNATURE       Explanant, type or private name of registered agent and the f replicable.       (MOTE: Registered Agent signature resulted were restating)       (MTE:         12.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       (MILLER, BARBARA         13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         17.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         17.       MILLER, BARBARA       13 ITTLE       12 NWE       Addition         3300 HE 191 ST / STE - 803       13 ITTLE       13 ITTLE       Change       Addition         NWE       330 DELETE       31 ITTLE       21 ITTLE       Change       Addition         NWE       33 ITTLE / ADDRESS       33 ITTLE / ADDRESS       Change       Addition         NWE       33 ITTLE / ADDRESS       33 ITTLE / ADDRESS       Change       Addition         ITTLE       DELETE       31 ITTLE       Change       Addition         NWE       33 ITTLE / ADDRESS       33 ITTLE / ADDRESS       Addition<			·			FL	
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SIGNATURE: Kerlowich Shillere REQUIRED 7-19-99 (305) 324-8228	indicated an officer	on this annual report or supplemental a or director of the corporation or the rec	annual report is true and accu eiver or trustee empowered t	rate and that my signature	shall have the same legal effect as if	made under oath; that I am	
	SIGNAT	URE: Karland	Millere REQ	UIRED	7-19-99	(305) 324-8228	

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July 20, 1999

Annual Report Filings **Division of Corporation** P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: 1999 Profit Corporation Annual Report for All State Bail Bonds, Inc. 65-0330281 

Gentlemen:

We represent the above referenced corporation and they have requested we explain, what we consider to be reasonable cause, for the delinguent filing and remitting of the Annual Report, in an effort to have the penalty provision abated.

In the past the Company's bookkeeper had handled the responsibility of filing the Annual Report. Having been shorthanded, without the services of its bookkeeper, the Company's owners do not recall receiving the original Annual Report. The Company has always complied with the filing requirements and the occurrence of delinguency was unintentional.

We request you accept the enclosed check of \$150.00 as full payment and waive the penalty for this singular filing delinguency.

Thank you for your cooperation in this matter.

Very truly yours,

MARK AO LIEBMAN, P.A.

Mark A. Liebman **Certified Public Accountant** 

ML:bf Enc.