

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000002227

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**2610767101CC**

**Entity Name:** ALLSTATES MANAGEMENT INC

**Current Principal Place of Business:**

6601 MEMORIAL HWY  
SUITE 118  
TAMPA, FL 33615

**Current Mailing Address:**

6601 MEMORIAL HWY  
118  
TAMPA, FL 33615 US

**FEI Number:** 84-4286768

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LUPO, CLARA L  
6601 MEMORIAL HWY  
118  
TAMPA, FL 33615 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	PRES	Title	VP
Name	LUPO, CLARA L	Name	JONES, CECILY J
Address	6601 MEMORIAL HWY SUITE 118	Address	6601 MEMORIAL HWY 118
City-State-Zip:	TAMPA FL 33615	City-State-Zip:	TAMPA FL 33615

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLARA LUPO

**PRES**

**03/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date