

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 20, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # F01000002258  
 1. Entity Name  
 THE AME FOUNDATION, INC.



Principal Place of Business: P.O. BOX 8847, CORAL SPRING, FL 33075  
 Mailing Address: P.O. BOX 8847, CORAL SPRING, FL 33075



01142006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 65-0994251  
 Applied For:  Applied For  Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MCNAMARA, THOMAS P  
 2909 BAY TO BAY BLVD., STE. 309  
 TAMPA, FL 33629

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	SERBIN, JAY
STREET ADDRESS	P.O. BOX 8847
CITY-ST-ZIP	CORAL SPRINGS, FL 33075
TITLE	VD
NAME	SERBIN, RANDI
STREET ADDRESS	P.O. BOX 8847
CITY-ST-ZIP	CORAL SPRINGS, FL 33075
TITLE	SD
NAME	SERBIN, CAROL
STREET ADDRESS	P.O. BOX 8847
CITY-ST-ZIP	CORAL SPRINGS, FL 33075
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000393021  
 01/25/06-80005-001 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAY SERBIN Pres. Date: 1/16/06 Daytime Phone #: 954-376-1996