2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L23944

FILED May 05, 2009 Secretary of State

Entity Name: AMERICAN MECHANICAL RIGHTS AGENCY, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
149 S. BAR #810	RINGTON AV	ENUE		
	LES, CA 9004	19		
Current Mailing Address:		New Mailing Address	New Mailing Address:	
149 S. BAR #810	RINGTON AV	ENUE		
	LES, CA 9004	19		
El Number:	65-0153729	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
13302 WINI SUITE A-10	DING OAKS B			
13302 WINI SUITE A-10 ΓΑΜΡΑ, FL Γhe above π n the State	DING OAKS B 00 336123425 U named entity s of Florida.	LVD JS	ourpose of changing its registere	d office or registered agent, or both,
13302 WINI SUITE A-10 ΓΑΜΡΑ, FL Γhe above ι	DING OAKS B 00 336123425 U named entity s of Florida. E:	LVD JS ubmits this statement for the p		d office or registered agent, or both,
I3302 WINI SUITE A-10 FAMPA, FL The above I n the State SIGNATUR n accordanc	DING OAKS B 336123425 the control of	LVD JS ubmits this statement for the place of Registered Age (2)(b), F.S., the corporation did no	ent	
I3302 WINI SUITE A-10 FAMPA, FL The above I In the State SIGNATUR In accordance Election Cam	DING OAKS B 336123425 the control of	LVD JS ubmits this statement for the place of Signature of Registered Age (2)(b), F.S., the corporation did not Trust Fund Contribution ().	ent ot receive the prior notice.	
I3302 WINI SUITE A-10 FAMPA, FL The above I In the State SIGNATUR In accordance Election Cam	DING OAKS B 336123425 Unamed entity s of Florida. E: Electron e with s. 607.193 paign Financing AND DIRECT PRES () LEVIN, SINDEE	LVD JS ubmits this statement for the place of Registered Age (2)(b), F.S., the corporation did not rust Fund Contribution (). FORS: Delete STON AVE, #810	ent ot receive the prior notice.	Date

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SINDEE LEVIN PRES 05/05/2009