

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90047 003 ***150.00

DOCUMENT # P00000075076

1. Entity Name
AMERICAN EXPORT & CO., INC.



Principal Place of Business
105 VALENCIA BLVD
JUPITER, FL 33458

Mailing Address
105 VALENCIA BLVD
JUPITER, FL 33458

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01132005

Chg-P

CR2E034 (10/03)

4. FBI Number
65-1029898

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent

Name MICHAEL MYLES
Street Address (P.O. Box Number is Not Acceptable)
105 VALENCIA BLVD
City JUPITER **FL** **Zip Code** 33458

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent for both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME MYLES, MICHAEL
STREET ADDRESS 105 VALENCIA BLVD
CITY-STATE-ZIP JUPITER, FL 33458

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME MYLES, CANDICE C
STREET ADDRESS 105 VALENCIA BLVD
CITY-STATE-ZIP JUPITER, FL 33458

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/05

561-799-3664

Daytime Phone #