


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000073803
 1. Entity Name
 AM PROPERTIES OF SOUTH FLORIDA, INC.



Principal Place of Business: 400 LESLIE DR., #720 HALLANDALE, FL 33009
 Mailing Address: 400 LESLIE DR., #720 HALLANDALE, FL 33009

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02032004 No Chg-P CR2E034 (10/03)
 4. FEI Number: 65-1124723 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 COTLER, CRAIG B
 8751 W. BROWARD BLVD., #305
 PLANTATION, FL 33324

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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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ANOUNOU, MOSHE
STREET ADDRESS	400 LESLIE DR., #720
CITY-ST-ZIP	HALLANDALE, FL 33009
TITLE	SD
NAME	ANOUNOU, ESTHER
STREET ADDRESS	400 LESLIE DR., #720
CITY-ST-ZIP	HALLANDALE, FL 33009
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Moshe Anounou MOISHE ANOUNOU 2/16/2004 954-328-2737