

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90246 037 ***158.75

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03262004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000003168 1. Entity Name AMERA 2800, INC.																											
Principal Place of Business 2900 UNIVERSITY DR CORAL SPRINGS, FL 33065			Mailing Address 2900 UNIVERSITY DR CORAL SPRINGS, FL 33065																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number <div style="border: 1px solid black; padding: 2px; text-align: center;">68-0542705</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Applied For Not Applicable</div>																							
City & State Zip Country		City & State Zip Country																									
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent RAHAEL, GEORGE 2900 UNIVERSITY DR CORAL SPRINGS, FL 33065																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																							
<div style="display: flex; justify-content: space-between;"> <div> FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 </div> <div> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees </div> </div>																											
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">D RAHAEL, GEORGE</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>2900 UNIVERSITY DR</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CORAL SPRINGS, FL 33065</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P Rahael, George</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>2900 University Drive</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>Coral Springs, FL 33065</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	D RAHAEL, GEORGE	<input type="checkbox"/> Delete	NAME	2900 UNIVERSITY DR		STREET ADDRESS	CORAL SPRINGS, FL 33065		CITY-ST-ZIP			TITLE	P Rahael, George	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	2900 University Drive		STREET ADDRESS	Coral Springs, FL 33065		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 affidavit with all other like empowered.				SIGNATURE: <div style="display: flex; justify-content: space-between;"> <div> George Rahael President </div> <div> 4/16/04 954-753-9500 <small>Date Daytime Phone #</small> </div> </div>																							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																											