FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1996 08:00 AM
Secretary of State

DOCUMENT # **P94000009813 (4)**

1. Corporation Name

~~AM II GROUP, INC.~~
America II Group, Inc. N/C 1.12.96

Principal Place of Business	Mailing Address
2600 118TH AVE. NORTH ST. PETERSBURG FL 33716	2600 118TH AVE. NORTH ST. PETERSBURG FL 33716

3. Date Incorporated or Qualified: 02/07/1994
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21: 13535 Feather Sound Drive
22 Suite, Apt. #, etc.: Suite 327
23 City & State: Clearwater, FL
24 Zip: 34622
25 Country: USA

2a. Mailing Address
26: SAME AS 2
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

4. FEI Number: 59-3270107 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

POINTER, ANN E
2600 118TH AVENUE NORTH
ST. PETERSBURG FL 33716

10. Name and Address of New Registered Agent

81 Name: delete second middle initial E
82 Street Address (P.O. Box Number is Not Acceptable): 13535 Feather Sound Drive
83: Suite 327
84 City: Clearwater FL 85 Zip Code: 34622

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title of officer if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DCCE	☐ DELETE	1.1 TITLE	D/CEO	☒ Change ☐ Addition
NAME	GALINSKI, MICHAEL		1.2 NAME	Galinski, Michael B.	
STREET ADDRESS	2600 118TH AVE. NORTH		1.3 STREET ADDRESS	13535 Feather Sound Drive, Suite 327	
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP	Clearwater, FL 34622	
TITLE	DSCC	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	JEAN-LOUIS, MAXIME F		2.2 NAME		
STREET ADDRESS	2600 118TH AVENUE NORTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CITY-ST-ZIP		
TITLE	DVCF	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ROGERS, ARIS		3.2 NAME	700001846017	
STREET ADDRESS	2600 118TH AVENUE		3.3 STREET ADDRESS	-05/31/96--01048--001	
CITY-ST-ZIP	ST. PETERSBURG FL		3.4 CITY-ST-ZIP	***208.75	
TITLE	S	☐ DELETE	4.1 TITLE	✓	☒ Change ☐ Addition
NAME	POINTER, ANN		4.2 NAME	Pointer, Ann E.	
STREET ADDRESS	2600 118TH AVENUE		4.3 STREET ADDRESS	13535 Feather Sound Drive, Suite 327	
CITY-ST-ZIP	ST PETERSBURG FL		4.4 CITY-ST-ZIP	Clearwater, FL 34622	
TITLE	DVC	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ALLSWORTH, TED		5.2 NAME		5/1/96
STREET ADDRESS	2600 118TH AVENUE NORTH		5.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		5.4 CITY-ST-ZIP		
TITLE	DT	☐ DELETE	6.1 TITLE	T	☒ Change ☐ Addition
NAME	HALL, GREGORY		6.2 NAME		
STREET ADDRESS	2600 118TH AVE. NORTH		6.3 STREET ADDRESS	13535 Feather Sound Drive, Suite 327	
CITY-ST-ZIP	ST. PETERSBURG FL 33716		6.4 CITY-ST-ZIP	Clearwater, FL 34622	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ann E Pointer, Ann E. Pointer 4/23/96 813-573-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #