COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT

S10280

AM FER INVESTIGATOR SERVICES, INC.

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90031 047 ***550.00



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9. Name and Address of Current Registered Agent FERNANDEZ, CARMEN N. 14747 SW 42ND TERR. MIAMI FL 33185 82 Street Address (P.O. Box Number is Not Acceptable) 84 City Pursuant to the provisions of sections 607 6502 and 607 1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or bodin, in the State of Florida. Statutes, and address of the purpose of changing its register office or registered agent, or bodin, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent and the statement for the purpose of changing its register office or registered agent and the statement for the purpose of changing its register agent in the corporation submits this statement for the purpose of changing its register agent of the florida. Statutes. NATURE Signature, typed or previous register agent of the florida. Statutes and the corporation submits the statement for the purpose of changing its register agent of the corporation submits the statement for the purpose of changing its register agent of the corporation submits the statement for the purpose of changing its register agent of the corporation submits the statement for the purpose of changing its register agent of the corporation submits the statement for the purpose of changing its register agent of the corporation submits the statement for the purpose of changing its register agent of directors. I hereby accept the appointment are register agent agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are register agent of directors. I hereby accept the appointment are reg	Zip	<u> </u>	}	$\overline{}$,		1	f 1	Yes	№ No	
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14747 SW 42ND TERR. MIAMI FL 33185 82 Sircet Address (P.O. Box Nulmber is Not Acceptable) Pursuant to the provisions of sections 607,0502 and 607,1508. Florida Statutes, the admend corporation submits this statement for the purpose of changing its register 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 approximent as registe agent. I am familiar with, and accept the obligations of, section 607,0505, Florida Statutes. NATURE Signature, typed or protect name of registrate agent and title if applications. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS E E ETRANDEZ, CARMEN N 12 NAME 23 STREET ADDRESS MIAMI FL DELETE 21 TITLE 12 NAME 23 STREET ADDRESS 42 COTN-ST-2P DELETE 21 TITLE 12 NAME 23 STREET ADDRESS 43 CITY-ST-2P DELETE 33 STREET ADDRESS 44 CITY-ST-2P E E ADDRESS 44 CITY-ST-2P DELETE 35 TITLE 16 Change 17 Change 18 Change 18 Change 19 Change 19 Change 10 Change 10 Change 11 TITLE 12 NAME 33 STREET ADDRESS 44 CITY-ST-2P E E CHADDRESS 45 CITY-ST-2P DELETE 51 TITLE 15 Change 16 Change 17 Change 18 STREET ADDRESS 45 CITY-ST-2P DELETE 51 TITLE 15 Change 16 Change 17 Change 18 STREET ADDRESS 45 CITY-ST-2P DELETE 51 TITLE 15 Change 16 Change 17 Change 18 STREET ADDRESS 45 CITY-ST-2P DELETE 51 TITLE		J. Hame and Address of Control			81	Name					
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indicated on this annual report or supplied with this litting does not qualify for the exemption stated in second 1750 (50), 1 should attack the first the first indicated on this annual report or supplied with this minutal 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 chapted, or on an attachment with an address.

SIGNATURE: