

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # S81478

(7)

95 JUN 30 AM 9:58

1. Corporation Name:

AMERICAN MICRO SALES, INC.

Principal Place of Business:

**1325 N. CONGRESS AVE., SUITE 204
WEST PALM BEACH FL 33401**

Mailing Address:

**1325 N. CONGRESS AVE., SUITE 204
WEST PALM BEACH FL 33401**

DO NOT WRITE IN THIS SPACE

1. Date Incorporated or Qualified

09/19/1991

3a. Date of Last Report

03/25/1994

4. FEI Number

65-0303187

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Certificate of Status Desired

☐ **\$5.00 May Be
Added to Fees**

7. Your corporation has liability for and complies with Chapter 1, 100 (17) Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21 1400 E NEWPORT CENTER DRIVE

2a. Mailing Address

21 1400 E NEWPORT CENTER DR.

Suite, Apt. # etc.

22 Suite 207

Suite, Apt. # etc.

27 Suite 207

City & State

23 DEERFIELD BEACH

City & State

28 DEERFIELD BEACH FL.

24 FL. 33442 25 U.S.

29 33442 30 U.S.

9. Name and Address of Current Registered Agent

**MESCHES, LARRY M.
1803 AUSTRALIAN AVENUE SOUTH
SUITE G
W. PALM BEACH FL 33409**

10. Name and Address of New Registered Agent

**81 Name COOMBS WILLIAM N.
82 Street Address (P.O. Box Number is Not Acceptable)
1400 E NEWPORT CENTER DRIVE
83 SUITE 207
84 City DEERFIELD BEACH FL 85 Zip Code 33442**

11. Pursuant to the provisions of Sections 60502 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

WILLIAM N COOMBS

JUNE 26 1995

Signature (Required to change name of registered agent and the corporation)

Signature (Required Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

**12.1 TITLE PSTD
12.2 NAME COOMBS, WILLIAM NOEL
12.3 STREET ADDRESS 1325 N. CONGRESS AVE., SUITE 204
12.4 CITY, ST. ZIP WEST PALM BEACH FL 33401**

**12.5 TITLE D
12.6 NAME HUFFMAN, DAN
12.7 STREET ADDRESS 2240 LONGE COVE CT.
12.8 CITY, ST. ZIP OVIEDO FL 32765**

**12.9 TITLE D
12.10 NAME RODGERS, DAVE
12.11 STREET ADDRESS 1033 ROSETREE LANE
12.12 CITY, ST. ZIP TARPON SPRINGS FL 34680**

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13.1 TITLE PSTD

13.2 NAME WILLIAM N COOMBS

13.3 STREET ADDRESS 22 WINDSOR LA

13.4 CITY, ST. ZIP P3G. FL. 33418

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13.40 CITY, ST. ZIP P3G. FL. 33418

SIGNATURE:

[Signature] **W N COOMBS**

Signature (Required to change name of registered agent and the corporation)

JUNE 26 95

305 421 9077

DATE

Telephone Number