

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000002189

**Entity Name:** AMERICAN ASSIST TRAVEL SERVICES, INC.

**Current Principal Place of Business:**

2893 EXECUTIVE PARK DRIVE  
SUITE 201  
WESTON, FL 33331

**FILED**  
**Mar 03, 2016**  
**Secretary of State**  
**CC3779473997**

**Current Mailing Address:**

2893 EXECUTIVE PARK DRIVE  
SUITE 201  
WESTON, FL 33331 US

**FEI Number:** 20-8171572

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JULIAN, MARIA F  
15875 SW 17 STREET  
WESTON, FL 33326 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D  
Name            JULIAN, MARIA F  
Address        15875 SW 17 STREET  
City-State-Zip: WESTON FL 33326

Title            D  
Name            VILLAFANE, GERARDO  
Address        19148 N HIBISCUS STREET  
City-State-Zip: WESTON FL 33332

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIA F JULIAN

**REGISTERED AGENT**

**03/03/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date