

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000008401

**Entity Name:** AMERICAN MICRO IMAGING, INC.

**Current Principal Place of Business:**

10631 S.W. 37 PLACE  
DAVIE, FL 33328

**FILED**  
**Feb 10, 2017**  
**Secretary of State**  
**CC4716599947**

**Current Mailing Address:**

10631 S.W. 37 PLACE  
DAVIE, FL 33328 US

**FEI Number:** 20-8368627

**Certificate of Status Desired:** No

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

CIVALE, JOHN  
10631 S.W. 37 PLACE  
DAVIE, FL 33328 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            PRES  
Name            CIVALE, JOHN  
Address        10631 S.W. 37 PLACE  
City-State-Zip: DAVIE FL 33328

Title            TRES  
Name            CIVALE, JOHN  
Address        10631 S.W. 37 PLACE  
City-State-Zip: DAVIE FL 33328

Title            SECT  
Name            CIVALE, JOHN  
Address        10631 S.W. 37 PLACE  
City-State-Zip: DAVIE FL 33328

Title            DIR  
Name            CIVALE, JOHN  
Address        10631 S.W. 37 PLACE  
City-State-Zip: DAVIE FL 33328

*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:** JOHN CIVALE

**PRESIDENT**

**02/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date