

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13907

**Entity Name:** AMTEX-N.M.S., INC.**Current Principal Place of Business:**2500 INDUSTRIAL STREET  
LEESBURG, FL 34748**Current Mailing Address:**2500 INDUSTRIAL STREET  
LEESBURG, FL 34748**FEI Number:** 58-1895025**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VAN DUSEN, PHILIP  
2500 INDUSTRIAL ST.  
LEESBURG, FL 34748 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            | MEYER, DAVID           |
| Address         | 823 EAST WALNUT STREET |
| City-State-Zip: | GARLAND TX 75040       |

|                 |                 |
|-----------------|-----------------|
| Title           | D               |
| Name            | BERCZY, LES     |
| Address         | 33501 CR 44-B   |
| City-State-Zip: | EUSTIS FL 32736 |

|                 |                         |
|-----------------|-------------------------|
| Title           | D                       |
| Name            | GINAS, JIM              |
| Address         | 5330 LAKE BLUFF TERRACE |
| City-State-Zip: | SANFORD FL 32771        |

|                 |                          |
|-----------------|--------------------------|
| Title           | D                        |
| Name            | STRATHMEYER, MICHAEL     |
| Address         | 3901 SAGAMORE HILL COURT |
| City-State-Zip: | PIANO TX 75025           |

|                 |                        |
|-----------------|------------------------|
| Title           | DIRECTOR OF FINANCE    |
| Name            | VAN DUSEN, PHILIP      |
| Address         | 2500 INDUSTRIAL STREET |
| City-State-Zip: | LEESBURG FL 34748      |

*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:** JIM GINAS**DIRECTOR****03/22/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date