

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 513562

FILED
Jan 13, 2009
Secretary of State

Entity Name: AMAS ENTERPRISES, INC.

Current Principal Place of Business:

642 HIBISCUS DRIVE
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

5218 VASSAR ROAD
JACKSONVILLE, FL 32207

Current Mailing Address:

PO BOX 1620
HALLANDALE BEACH, FL 330081620 US

New Mailing Address:

4446-1A HENDRICKS AVENUE
STE 128
JACKSONVILLE, FL 32207 US

FEI Number: 59-2219399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYERS, DAVID A MR.
642 HIBISCUS DRIVE
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

BYERS, DAVID A MR.
5218 VASSAR ROAD
JACKSONVILLE, FL 32207 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:

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BYERS, DAVID A
Address: P.O. BOX 1620
City-St-Zip: HALLANDALE BEACH, FL 330081620

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: BYERS, DAVID A
Address: 4446-1A HENDRICKS AVE, STE 128
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID A. BYERS

MR

01/13/2009

Electronic Signature of Signing Officer or Director

Date