## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 613063

(7)

**AMERICAN MISO COMPANY** 

FILED									
Feb	12	1998	8:00am						
Se	ecre	tary c	of State						

704-665+7790

Principal Place	e of Business	Mailing Address			- I IMESSO EISOK SIBED SISII ABUSO BUSON SISI B	TREIT OCCUP ATORE ASOLT DI			
RT. 3. BOX 54		92 MCINTOSH RD.							
TOTAL OFFI		ASHEVILLE NC 28806							
RUTHERFORD	TON NC 28139				DO NOT WRITE IN	1 THIS SPACE			
					3. Date Incorporated or Qualified 03/15/1979				
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		pplied For		
21 422.					56-1355783	N N	ot Applicable		
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required					
city & State 23 Rutherforaton NC Zip		City & State			6. Election Campaign Financing		Мау Ве		
		Z(p)   Country					to Fees		
					This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.    Yes				
24 2818	9. Name and Address of Current I	29 Registered Agent	30		Personal Property Tax due June 30  10. Name and Address of New Region		140		
I EV	M, Benjamin D.	Togother Togother	B1 Nar	me					
	7 SW 86TH ST, #D-404								
	MI FL 33143		<b>82</b> Stre	et Addres	ss (P.O. Box Number is Not Acceptable	)			
			83						
			84 City	<b>y</b>		FL 85 Zip	Code		
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statut	es, the above-nan	ned corpo	ration submits this statement for the pur	pose of changing	its registered		
office or re	egistered agent, or both, in the State of	Florida Such change was a	authorized by the corida Statutes	corporatio	on's board of directors. I hereby accept	the appointment a	s registered		
SIGNATURE	Transia With, and accept the congrue	(410 OI, 000001 001 0000, 1 K	or ou ordinates.						
SIGNATURE	Signature, typied or printed name of registered agent.	and title it applicable (NOT	E Registered Agent sign	ature required	ownen reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE				
TITLE	CANO DADON E	☐ DECETE	1 1 TITLE		ssident	Change	Addition		
NAME	EVANS, BARRY E		1.2 NAME	By	ansi borry ti				
STREET ADDRESS	92 MCINTOSH RD. ASHEVILLE NC		1.3 STREET ADDRE		McInton Rd	ļ			
CITY-ST-ZIP	P P	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		heville NC 28806	Change	Addition		
TITLE	DEBONA, DONALD J	out otter	2.2 NAME	410	e-President	C) curinge	Z Addition		
NAME	RT. 3, BOX 541			USO	mzales, Gregory A	ļ			
STREET ADDRESS	RUTHERFORDTON NC		2.3 STREET ADDRE	2 4.	25 maple Creek Rd utherfordton NC	28139			
CITY-ST-ZIP TITLE	S	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		THE TOTAL NC	24 Change	Addition		
NAME	MONTGOMERY, MONTA		3.2 NAME	6	onta, Montgomery				
STREET ADDRESS	92 MCINTOSH RD		3.3 STREET ADDRE	« Q7	metatosh Rd				
CITY-ST-ZIP	ASHEVILLE NC		3.4. CITY-ST-ZIP		heville NC 28806	•			
TITLE		DELETE	4.1 TITLE			Change	Addition		
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRE	SS					
CITY-ST-ZIP			4.4 CiTY-ST-ZIP						
TITLE		DELETE	5.1 TITLE			☐ Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRE	SS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		DELETE	6.1 TITLE			☐ Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRE	SS					
CITY-ST-ZIP		- 4	64 CITY-ST-ZIP						
indicated	on this annual report or supplemental a	annual report is true and acc	urate and that my	signature	lection 119.07(3)(i), Florida Statules. I fu s shall have the same legal effect as if m	nade under oath; th	natlam an i		
officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address									