

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 22, 2007 8:00 am
Secretary of State**

02-07-2007 90048 010 ***158.75

DOCUMENT # 668505

1. Entity Name
AMICUS CORP. OF AMERICA



Principal Place of Business
**5500 COLLINS AVENUE
#402
MIAMI BEACH, FL 33140**

Mailing Address
**5500 COLLINS AVENUE
#402
MIAMI BEACH, FL 33140**

DO NOT WRITE IN THIS SPACE



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number
11-2073915

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GREEN, GEORGE
5500 COLLINS AVENUE
SUITE 402
MIAMI BEACH, FL 33140**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	OP GREEN, GEORGE 5500 COLLINS AVENUE, SUITE 402 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MARTINCAK, LAUREN G 1550 NORTHVIEW DRIVE MIAMI BEACH, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DAS GREEN, TAMMY J 5500 COLLINS AVE. SUITE 402 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/07
Date

*305-867
6572*
Daytime Phone #