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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 848621

(9)

AMERICAN INSTANTS, INC.

## FILED Apr 24 1997 8:00am Secretary of State

Principal Plac	o of Business	Mailing Address								
Principal Place of Business 117 BARTLEY FLANDERS RD P.O. BOX \$36 FENDERS NJ 07836 US		P.O. BOX 817 P.O. BOX 536 FLNDERS NJ 07836-0536 US				Te- 5		0	7	
08		03				3. Date Incorporated or Qualified 03/25/1981		ate of Last f <b>07/1996</b>	Teport	l
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		A	pplied For	1	
Suite, Apt. #, etc.		26 Suite, Apt. #. etc.			22-1670383	Not Applicable   \$8.75 Additional			4	
22		27				5. Certificate of Status Desired Fee Required				
City & State	0	City & Stato				Election Campaign Financing     Trust Fund Contribution			May Be	
Zip Country		<b>28</b>				Trust Fund Contribution				1
24	25				Florida Statutes			s 🗆 No		
	9. Name and Address of Current	Registered Agent			~	10. Name and Address of New Re	gistered	Agent		
	CHNER, MITCHELL B.	PCMANATA AND		81	Name					
	DILWORTH,PAXSON,KALISH,KAU E 700, 150 E. PALMETTO PARK			62	Street Addre	ss (P.O. Box Number is Not Acceptat	ole)		, , , , , , , , , , , , , , , , , , , ,	7
	A RATON FL 33432	110/10	ļ	83			<del></del>		,,	
			}	84	City			<b>85</b> Zip	Code	1
11. Pursuant	to the provisions of Sections 607 0502	2 and 607.1508. Florida Statu	tes the at	iove-	named corpo	oration submits this statement for the r	FL ourpose o	of changing	its registered	-
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was itions of, Section 607.0505, Fi	authorized orida Stati	by ules.	the corporatio	on's board of directors. I hereby acce	of the app	pointment as	s registered	
SIGNATURE										
12.	Signature, typed or printed name of registered age:			l Agen	il signaturo required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	D DIDECTO	DC IN 10	بر ا
TITLE	OFFICERS AND DIRECTORS 13. PD DELETE 1.11		1,1 111	LE		ADDITIONS/CHANGES TO OFFIC	JENS AIN	☐ Change	Addition	- 8
NAME	ROCHE, THOMAS J., JR.	1.2 N			Ì					1
STREET ADDRESS	7 SUMMIT RD.	1.3 \$		REET A	ADDRESS					Š
CITY-ST-ZIP	BROOKSIDE NJ		1.4 CB	1Y-S1	- ZIP				<u>.</u>	ء ؤ
TITLE	VD	☐ DELETE	21111		ļ			L Change	L Addition	10
NAME	ALLERT DD		2 2 NA		1000000					
STREET ADDRESS	DOOMEDE ALL				ADDRESS					ļ
TITLE	STD	DELETE	2. 4 CITY 3.1 TITLE		1-211	· · · · · · · · · · · · · · · · · · ·	177	Change	Addition	1
NAME	ROCHE, VERA T.		3.2 NA	ME.				•		
STREET ADDRESS	7 SUMMIT RD.		3.3 STREET		ADDRESS					
CITY-ST-ZIP	BROOKSIDE NJ	T busts	3.4. Cl		T-ZiP			0	4 3 300	1
TITLE NAME		☐ DELETE	4.1 1li 4. 2 N/					L Change	☐ Addition	
STREET ADDRESS			ľ		ADDRESS					
CITY-ST-ZIP			4.4 011		l l					
TITLE		DELETE	5.1 TIT					Change	Addition	1
NAME			5.2 NA	ME		•				1
STREET ADDRESS					ADDRESS					-
CITY-ST-ZIP		I britte	5.4 00		-ZIP			Charte	12200	-
TITLE		DELETE	6.1 Till					Change	☐ Addition	
NAME STREET ADDRESS			6.2 NA		inneree					
CITY-ST-ZIP			6.3 STREET ADDRESS : 6.4 CITY-S1-ZIP							
0111-01-44			0.4 011	1 01	F-11					4

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information incleated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CICNIATURE.

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10/97

201-584-8811