## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

AMERICAN III rincipal Place of Busin 2210 WEST 10TH CO HIALEAH FL 33010 US		TY, INC.					
2210 WEST 10TH CO HIALEAH FL 33010 US	ess	AMERICAN INVESTMENT REALTY, INC.					
HIALEAH FL 33010 US		Maiing Address					
	2210 WEST 10TH COURT 4390 SW 14 STREET HALEAH FL 33010 MIAMI FL 33134						
					3. Date incorporated or Qualified 03/11/1982	3a. Date of L 08/08	ast Report 3/1995
Principal Place of Business		<u> </u>	2a. Mailing Address		50 0004444		Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	<u></u> \$	5.00 May Be Added to Fees
Zip Country		Zip	·   · · · · · · · · · · · · · · · · · ·		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No		· · · · · · · · · · · · · · · · · · ·
9. Na	me and Address of Cu				10. Name and Address of New R		ıt
•				81 Name			
CACCIAVILLANI, RAFAEL 4390 S.W. 14TH STREET				82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
MIAMI FL 33134			83				
· · · · · · · · · · · · · · · · · · ·				84 City			T 75 Code
						FL 85	
GNATURESignalure, ty	ed or printed name of registered a	igent and little if applicable.	(NOTE: Registere	id Agent signature requirer		DATE	
LE PD	OFFICERS	AND DIRECTORS  DELET	13.	TITLE	ADDITIONS/CHANGES TO OFF	CERS AND DIRI	
AME CACCIAVILLANI, RAFAEL		<del>-</del>	1.2 NAME			<u></u> -	
j.	SOUTHWEST 14TH	STREET	1.3	STREET ADDRESS			
IY-SI-ZIP <b>MIAN</b>	FL	[7] DELET		CITY-S1-ZIP TITLE		F-1 0+	ones [ faktities
ME				NAME		☐ Ch	ange   Addition
REEL ADDRESS			ŀ	STREET ADDRESS			
Y ST-ZIP				CHTY-ST-ZIP			
LE MI		☐ DELETI		THILE -		☐ Ch	ange 🔲 Addition
REFT ADDRESS				STREET ADDRESS			
Y SI-ZIF	Paris,			CITY-ST-ZIP	20000179	arwor	<b>5</b> 0
LE		DELETI		TITLE		15046	ange 🔲 Addition
Mf				NAME	***200.00	<del>-</del> <del>-</del>	
REET ADDRESS YESTEZIP				STREET ADDRESS  CITY-ST-ZIP			
LF		☐ DELETI		TITLE		☐ Ch.	ange 🔲 Addition
ME			52	NAME		•	
REET ADDRESS			5.3	STREET ADDRESS			
Y - \$1 - ZiP	***************************************	ריין אני ביי		CITY - ST - ZIP			1000 FT 1120
L <del>f</del> Më		DELETI		TITLE NAME		Ch.	ange 🗌 Addition
REF1 ADDRESS				STREET ADDRESS			
Y · ST · ZIP			/ /	CHTY-ST-ZIP			
. I do hereby certify the	the information supplied	ed with this filing is voluntari	v furnished and	does not qualify for	or the exemption stated in Section 119. Ite and that my signature shall have the s report as required by Chapter 607, Fk	07(3)(k), Florida S	Statutes, I further

SIGNATURE:

April 22, 1996 (305) 446-3879