

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G76523

FILED
Jan 30, 2008
Secretary of State

Entity Name: AMERINATIONAL MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

2400 EAST COLONIAL DRIVE
ORLANDO, FL 328149006 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 149006
ORLANDO, FL 328149006 US

New Mailing Address:

FEI Number: 59-2354740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIM, SON JA
2400 E COLONIAL DR # 1
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

KIM, SON
2400 E COLONIAL DR # 1
ORLANDO, FL 32803 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: SON KIM

01/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: KIM, SON JA,
Address: 2400 E COLONIAL DR., #1
City-St-Zip: ORLANDO, FL

Title: VD () Delete
Name: KIM, YOUNG K.,
Address: 2400 E COLONIAL DR. #1
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: KIM, SON J,
Address: 2400 E COLONIAL DR., #1
City-St-Zip: ORLANDO, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SON KIM

P

01/30/2008

Electronic Signature of Signing Officer or Director

Date