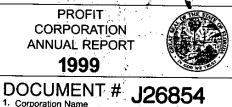
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

AMERICAN ANGEL CORPORATION

1. Corporation Name

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 08, 1999 8:00 am Secretary of State

02-08-1999 90039 025 ***150.00

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Principal Pla	ice of Business	Mailing Address	·	T INDIAN ÉSSO ISDA DUIDS TRINT BILL	ATOK ATOK BIBIT BIBIK BIBIT	DIDIL BEBIE 1991
2621 NW 201 MIAMI FL 331 JS	- · · · · · · · · · · · · · · · · · · ·	2621 NW 20 ST MIAMI FL 33142 US	,	DO NOT INDITE		•
		US		3. Date incorporated or Qualifed	IN THIS SPACE	
				08/04/1986		
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	I I A	oplied For
1		26		<u>59-2737314</u>	· · · · · · · · · · · · · · · · · · ·	ot Applicable
Suite, Ap		26 Suite, Apt. #, etc. City & State Country Country Zip Country Rersonal Property Tax.		\$8.75 Fee Re	Additional equired	
City & Sta	ite	⊢ ′			\$5.00 Added	May Be
Zip i	· — ·		_ ′	8. This corporation owes the current		
<u>'l</u>	<u> </u>		30		Yes	No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	stered Agent	
EM	ORY, HOWARD B ESQ	÷	81 Name		* 7 1	
ON	E DATRAN CENTER, SUITE 910		82 Street Add	iress (P.O. Box Number is Not Acceptable)	
910	0 S. DADELAND BOULEVARD		83	#24 - 2	18: 1	1 0161 327
MA	MI FL 33156		<u> </u>			
			84 City	1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip (Code Code
1. Pursuant office or	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Stat Florida, Such change was	tutes, the above-named con authorized by the corporat	poration submits this statement for the pur ion's board of directors. I hereby accept the	pose of changing its e appointment as re	registered gistered
	The state of the s	ns of, Section 607.0505, F	lorida Statutes.	• *		,
IGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Registered Agent signature require	ad whose coinciditions		
2.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
TLE	M	☐ DELETE	1.1 TITLE	r promote	☐ Change	Addition
ME	NACHTIGALL, PATRICIA	• •	1.2 NAME	or the all the first	- J	
REETADORESS	2621 NW 20 ST		1.3 STREET ADDRESS	5	•	1.
IY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			, .
LE	PSD	DELETE	2.1 TITLE		☐ Change	Addition
ME 	ANGEL, AMPARO	•	2.2 NAME			
REET ADDRESS	2621 NW 20 ST	•	2.3 STREET ADDRESS		, r	
Y-ST-ZIP LE	MIAMI FL		2. 4 CITY-ST-ZIP	and the second s		,
ME SA	NACHTIGALL, ANDREA	☐ DELETE	3.1 TITLE		Change	☐ Addition
REET ADDRESS	2621 NW 20.ST		3.2 NAME			İ
Y-ST-ZIP	MIAMI FL	•	3.3 STREET ADDRESS	1.33.4421.19.652.40	からあった (新社では 2	1 F (2) 1757
LE	T	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		. N. 261 W. S. 7	ra' (1) . [4]
ME	AMPARO, ANGEL		4.2 NAME	· · · · · · · · · · · · · · · · · · ·	i gotto ga <u>t i Unange</u> ; k	Addition
REET ADDRESS	2621 NW 20 ST		4.3 STREET ADDRESS			ĺ
Y-ST-ZIP	MIAMI FL	***	4.4 CITY-ST-ZIP			
E		☐ DELETE	5.1 TITLE		☐ Change	Addition
ME :	•		5.2 NAME	Commence of the second	, T.	∧aaaaanii
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.Е	State of the state	☐ DELETE	6.1 ππLE		☐ Change	Addition
Æ	AND CONTRACTOR		6.2 NAME			34.
EET ADDRESS	MANA T	• *	6.3 STREET ADDRESS		. ,	. '''
-ST-ZIP	#\$C		6.4 CITY-ST-71P		, .	

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 of 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, with all other like empowered.