

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90004 022 ***150.00

DOCUMENT # K54684 1. Entity Name AMMEX INVESTMENTS, INC.					
Principal Place of Business 2125 BLUE HERON COVE DR ORANGE PARK, FL 32003			Mailing Address 2125 BLUE HERON COVE DR ORANGE PARK, FL 32003		
2. Principal Place of Business No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		40078705	
City & State Zip Country		City & State Zip Country		04182007 Chg-P CR2E034 (12/06)	
4. FFI Number 65-0091986				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEE, GLENN R. 2125 BLUE HERON COVE DR ORANGE PARK, FL 32003			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MEE, GLENN R. 2125 BLUE HERON COVE DR ORANGE PARK, FL 32003		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SPERLING, BENJIE 2125 BLUE HERON COVE DR ORANGE PARK, FL 32003		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT Benjie Sperling P.O. Box 7058 Hollywood, FL 33081	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		☐ Change ☐ Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		☐ Change ☐ Addition		
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: <i>Benjie Sperling</i>			4-21-07 954-261-8094		