

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90050 037 ***150.00

DOCUMENT # K69131

1. Corporation Name

AMERICAN MACHINE, INC.

Principal Place of Business

157 FLAMINGO RD
%KENNETH KROEBER
EDGEWATER FL 32141
US

Mailing Address

P O BOX 1487
%KENNETH KROEBER
EDGEWATER FL 32141
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

KROEBER, KENNETH
~~3625 S. US HWY 1~~
EDGEWATER FL 32141

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/28/1989

4. FEI Number

59-2941333

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

KROEBER, KENNETH

82 Street Address (P.O. Box Number is Not Acceptable)

157 FLAMINGO RD

83

84 City

EDGEWATER

FL

85 Zip Code

32141

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Kenneth E. Kroeber
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-26-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME KROEBER, KENNETH E.

STREET ADDRESS 157 FLAMINGO ROAD

CITY-STATE-ZIP EDGEWATER FL

TITLE ST ☒ DELETE

NAME KROEBER, SHERRY R.

STREET ADDRESS 157 FLAMINGO RD.

CITY-STATE-ZIP EDGEWATER FL

TITLE ST ☐ DELETE

NAME KEITH J KROEBER

STREET ADDRESS 177 NAUBUC AV

CITY-STATE-ZIP EAST HARTFORD, CT 06118

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 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, with a title like empowered.

SIGNATURE:

Kenneth E. Kroeber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99

Date

904-426-0820

Daytime Phone #

CR2E034 (11/98)