2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 11, 2004 08:00 AM
Secretary of State

DOCUMENT # L01227

1. Entity Name
AMERICAN INVESTORS GROUP, INC.

Principal Place of Business	Mailing Address
5050 S US HWY 17-92 SUITE 102 CASSELBERRY, FL 32707	5050 S US HWY 17-92 SUITE 102 CASSELBERRY, FL 32707

03082004 No Chg-P CR2E084 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2955602
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MIDDLETON, DAVID
5050 S HWY 17-92, STE 102
CASSELBERRY, FL 32707

DO NOT WRITE IN THIS SPACE

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when name changed)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

000000085787
03/11/04-80062-010 150.00

10.	OFFICERS AND DIRECTORS
TITLE	D
NAME	MIDDLETON, DAVID
STREET ADDRESS	5050 S.US 17-92 ,STE102
CITY-ST-ZIP	CASSELBERRY, FL 32707
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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 David Middleton DAVID MIDDLETON 3-8-04 407-331-7737
SIGNATURE AND TYPED OR PRINTED NAME OF FLORIDA OFFICER OR DIRECTOR — Date — Daytime Phone #