## 2008 FOR PROFIT CORPORATION **FILED** ANNUAL REPORT Feb 06, 2008 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 5050 S US HWY 17-92 SUITE 102 SUITE 102 CASSELBERRY, FL 32707 CASSELBERRY, FL 32707 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2955602 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MIDDLETON, DAVID DO NOT WRITE 5050 S HWY 17-92, STE 102 CASSELBERRY, FL 32707 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signeture required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10 TITLE MIDDLETON, DAVID NAME STREET ADDRESS 5050 S.US 17-92 .STE102 CITY-ST-ZIP CASSELBERRY, FL 32707 TITLE NAME U000000818147 STREET ADDRESS 02/15/08-80034-001 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 lips empowered.

SIGNATURE: David Middleton

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

IN THIS SPACE

Applied For

Not Applicable