2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005 8:00 am
Secretary of State
06-20-2005 90002 008 ***150.00
06-29-2005 90003 045 ***400.00

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DOCUMENT # L27184

1. Entity Name
AMERICAN INFORMATION SERVICES, INC.

Principal Place of Business	Mailing Address
ONE S.E. THIRD AVENUE 28TH FLOOR MIAMI, FL 33131	ONE S.E. THIRD AVENUE 28TH FLOOR MIAMI, FL 33131

06152005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
c/o Marshall R. Burack, Esq. ~~One SE Third Avenue~~ Suite, Apt. #, etc. 28th Floor	c/o Marshall R. Burack, Esq. ~~One SE Third Avenue~~ Suite, Apt. #, etc. 28th Floor
City & State Miami, FL	City & State Miami, FL
Zip 33131	Country USA
Zip 33131	Country USA

4. FEI Number
65-0151333
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ISLAMI, JAHAN ONE S.E. THIRD AVENUE 28TH FLOOR MIAMI, FL 33131	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZINN, ROBERT A ONE S.E. THIRD AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DUFFY, JAMES, C. Citrus Center, 17th Floor 255 South Orange Drive Orlando, FL 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BELOFF, DONN A 350 EAST LAS OLAS BOULEVARD, SUITE 1600 FORT LAUDERDALE, FL 33301	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS TOLEDO, NERY C. One S.E. Third Avenue, 28th FL Miami, FL 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/S ISLAMI, JAHAN ONE S.E. THIRD AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS FULLWOOD, DONNA Esperante Bldg., 4th Floor 222 Lakeview Avenue, Suite 400 ~~West Palm Beach, FL 33401~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS CHIRU, ANGELICA M ONE S.E. THIRD AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS GUERRA, DIANA ONE S.E. THIRD AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS GUERRA, DIANA 350 East Las Olas Blvd., Suite 1600 Fort Lauderdale, FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BURACK, MARSHALL ONE S.E. THIRD AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Marshall R Burack, President 6/16/05 305 374 5600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #