05131999-90017-033-\$150.00-\$150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED May 13, 1999 8:00 am Secretary of State

. 1	·999	The state of the s	DIVISION OF C	ORPORATIONS	05-13-1999 90017 033 ***150.00		
DOCUMENT #M15528 1. Corporation Name American Specialties, Inc.					1		
rincipal Place	of Business	Mailing A	ddress		-		
					DO NOT WRITE IN THIS SPACE)E	_
					3. Date Incorporated or Qualifed		
fina a a l Dia	ace of Susiness	2a. Mailin	o Address		5/15/85 4. FEI Number	Applied For	4
	. 36th Court	├ ─¬	9 Sherida	~ G+	59-2532292	Not Applicable	1
Suite, Apt. #		Suite,	Apt. #, etc.		_ \$8	.75 Additional	7
· <u>· · · · · · · · · · · · · · · · · · </u>		27 313			5. Certificate of Status Desired	Fee Required	_
City & State		- L '	State	- 22024		5.00-May Be	}
Zip	Wood, FL Country	28 Hol	lywood, F	L 33021 Country	8. This corporation owes the current year Intangible	edded to Fees	-{-
33021		29	[:	30}_	Personal Property Tax.	_	_
	9. Name and Address	of Current Registered	Agent		10. Name and Address of New Registered Agen		
				81 Name			
		*	- =	82 Street Add	ress (P.O. Box Number is Not Acceptable)		7
ř Ř	ICHARD WARNER		r(_ 7	03			4
718	60 N. 36th Co	urt.		03		_	
	11ywood, FL 3			84 City	FL 85	Zip Code	Ĩ
		007 0500 4 607 450	A Florida Statute	s the above-named con	position submits this statement for the purpose of chaor	ino its registered	-
office or re	egistered agent, or both, in	the State of Florida. Such	th change was au	thorized by the corporat	on's board of directors, I hereby accept the appointmen	t as registered	1
agent. i ar SIGNATURE	in latinital with, and accept	ara conganons or, court	AT 001.0303, F 10.1	og outplos.	••		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ro				Regulared Agent signature requi			
12.		CERS AND DIRECTOR	S DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIF	hange Addition	⊣ ≥
-	D/S/T		Deceie	1.1 TITLE 1.2 NAME		warde	
	Richard S.		" - " -	1.3 STREET ADDRESS			CRPECIA
OFFICE ADDRESS	JOOJ Directio		#313	1.4 CTY-ST-ZIP			1 %
11 V-\$T-2P	Hollywood,	FL-33021	☐ OELETE	2.1 TITLE		hange Addition	<u>ا</u> د
	Michael A.	Santomaso		22 NAME			i
			#313	23 STREET ADDRESS			
···ST-21P	Hollywood,			2.4 City-ST-ZIP		. <u></u>	4
	VP		DELETE	31 TITLE		change 🔲 Addition	[^] (
• =	Nancy Warne	r		3.2 NAME			
" JI ADDRESS	3389 Sherid	lan Street,	#313	3.3 STREET ADDRESS			1
ST-ZiP -	Hollywood,	FL 33021 -	DELETE	4.1 TITLE		Change Addition	┧~
			- Defere	4.2 NAME		الموادية وي	}
-				4.3 STREET ADDRESS			}
ST-ZIP				44 CITY-ST-ZIP	•		_
21.71.			☐ DELETE	5.1 TITLE	.00	hange	1
-				5.2 NAME			
···_ I ADDRESS				5.3 STREET ADDRESS			
. \$T-ZIP				5.4 CITY-ST-ZIP			4
			DELETE	6.1 TITLE	Цc	hange Addition]
-				6.2 NAME		-	1
	!			6.3 STREET ADDRESS			1

st-zip

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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 507. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

-- SNATURE

MANCY WAY 11 PY MANC OF SIGNING OFFICER OR DIRECTOR

4/25/99

954 963 2936