2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jun 21, 2004 8:00 am Secretary of State

05-03-2004 90770 050 ****70 00

DOCUMENT # N03000001101 1. Entity Name AMASA 2, INC.

Principal Place of Business 1324 NW 168TH AVE PEMBROKE PINES FL 33028 1324 NW 168TH AVE PEMBROKE PINES FL 33028 66428751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 82-0589 29 Not Applicable 2ip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILLAIM NASH, MARY L Street Address (P.O. Box Number is Not Acceptable) 1324 NW 168TH AVE PEMBROKE PINES FL 33028 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 primed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Addition KX Delete MILE ☐ Change TITLE. President CURRY, DELORES NAME NAME Mary Nash 1041 SW 191 LANE STREET ADDRESS STREET ADDRESS 1324 NW 168th Ave Pembroke Pines, FL 33028 PEMBROKE PINES FL 33029 CITY-ST-ZIP" CITY-ST-ZIP XX Change ☐ Addition TITLE ☐ Delete Vice President SCOTT, WILLIE NAME MALLE 4740 NW 178TH TERRACE STREET ADDRESS STREET ADDRESS CAROL CITY FL 33055 CITY - ST- ZIP CITY-ST-ZIP ☐ Change XIX Addition TITLE Tteasurer Mary Dorestt 1160 NW 185th Terr Pembroke Pines, FL 33029 TITLE XX Delete BELGRAVE, GAYE NAME 3830 SW 1648D AVE STREET ADORESS STREET ADDRESS MIRAMAR FL 33027 CITY-ST-ZIP CRY-ST-ZIP Secretary Charge XX Addition TITLE TITLE Defete NAME Nicole Nedd STREET ADDRESS STREET ADORESS 5701 Collins Ave CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33140 ☐ Addition Channe ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 617. 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: _

Mary Nash CER OR DIRECTOR

04/29/04

(954) <u>704-1981</u>