## FILED

03 SEP 10 AM 11: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P00000071530  1. Entity Name AMDINAR, INC.						
Principal Place of Business 11500 S.W. 108TH AVENUE MIAMI, FL 33176-3967		Malling Address 11509 S.W. 108TH AVEN MANI, FL 33176-3967	IUE			
t. Principal F	Place of Business	3. Mailing Address			 	
Suite, Apt. #, etc.		GI 63 MI Am. LAKES			CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number Applied For	
Zip	Country	Zip (33014	Country	,+6	65-1024517   Not Applicable  5. Certificate of Status Desired \$8.75 Additional	
	6. Name and Address of Current	Registered Agent	3JSA	_	7. Name and Address of New Registered Agent	
500 S.W.	I, HEZZEL TOSUL AVENUE 33176-3307			daress (i	DUARD GARCIA INC. P.O. Box Number is Not Acceptable)	
			G/	<u> </u>	my LAKES DV E	
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registered office of	register	red agent, or both, in the State of Florida. I am familiar with, and accept	
GNATURE .	Signature: typed or primed pirms of registered agent		- Registered Agent Syste		9/08/03	
Aft ake Check ).	ILE NOWILLEFEE IS \$160,000 Amended UBR IS 661.25 Payable to Florida Department OFFICERS AND	DIRECTORS	11.	<del></del>	9. Election Campaign Financing Trust Fund Contribution.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
ile Ime Reet address IY-ST-ZP	D JACOBSEN, HEZZEL 11600 S.W. 108TH AVENUE MIAMI, FL 331763967	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		900023362479 09/26/03-01025-027 ** §58	
LE Me Reet address IV-ST-21P	D JACOBSON, HAROLD W 11600 SW 108TH AVENUE MIAMI, FL 33176	☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition 문	
		. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
MĒ EET ADDRESS	4	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Charge ☐ Addition	
JE Eet address		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, ☐ Change ☐ Addition	
LE Me Eet address	,	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
indicated of the con	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address,	Delete  Delete  this filling does not qualify for true and accurate and that movered to execute this report s	CITY-ST-ZIP  1 TILE  NAME STREET ADDRESS CITY-ST-ZIP  1 TILE  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  THE exemption Sta	Ned in Sec ave the supper 607,	. Change Addition	

**2003 FOR PROFIT CORPORATION** 



## EDWARD GARCIA, INC.

September 8, 2003

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O.BOX 1500 TALLAHASSEE, FL 32302-1500

REF: ANNUAL REPORT: YEAR 2003 AMDINAR, INC. DOC # P00000071530

To Whom It May Concern:

AS PER OUR CONVERSATION, WE NEVER RECEIVED AN ANNUAL REPORT

DUE TO A WRONG MAILING ADDRESS, PLEASE NOTE THE NEW MAILING

ADDRESS IN ATTACHED ANNUAL REPORT "MAILING ADDRESS" ON ANNUAL

REPORT FORM AS PER YOUR INSTRUCTIONS.

WE ARE REPECTFULLY REQUESTING THAT THE DIVISION OF CORPORATIONS ACCEPT THE \$ 150.00 IN PAYMENT OF THE ANNUAL REPORT AND \$ 8.75 FOR CERTIFICATE OF STATUS AS REQUESTED.

THANKING YOU IN ADVANCE FOR YOUR UTMOST CONSIDERATION.

Sincerely,

Edward Garcia, BBA, EA PRESIDENT

> EDWARD GARCIA,, INC. REGISTERED AGENT