2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000117099

Entity Name: AMERICAN INDUSTRIAL MANAGEMENT, INC.

FILED Mar 15, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9470 JOEL DR. 2050 34TH WAY NORTH SEMINOLE, FL 33777 LARGO, FL 33771 **Current Mailing Address: New Mailing Address:** 9470 JOEL DR. PO BOX 10231 SEMINOLE, FL 33777 LARGO, FL 33773 FEI Number: 59-3689795 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FUCHS, LAWRENCE B FUCHS, LAWRENCE B 9470 JOEL DR. 15777 BOLESTA ROAD SEMINOLE, FL 33777 LOT #95 CLEARWATER,, FL 33760 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. SIGNATURE: 03/15/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition FUCHS, LAWRENCE B FUCHS, LAWRENCE B Name: Name: 9470 JOEL DR. 15777 BOLESTA ROAD LOT 95 Address: Address: City-St-Zip: SEMINOLE, FL 33777 City-St-Zip: CLEARWATER,, FL 33760 Title: Title: () Change (X) Addition () Delete FUCHS, LAWRENCE B JR. Name: Name: 1773 AUDREY DRIVE Address: Address: CLEARWATER, FL 33759 City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete FUCHS, THEODORE F Name: Name: 2751 S. PINES DRIVE Address Address: City-St-Zip: City-St-Zip: LARGO, FL 33771 Title: () Delete Title: () Change (X) Addition FUCHS, RICHARD C Name: Name: Address: Address: 2751 S. PINES DRIVE City-St-Zip: City-St-Zip: LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE B. FUCHS P 03/15/2002