


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State

05-31-2005 90005 016 ***150.00

DOCUMENT # P02000032202 1. Entity Name AMERICA ENTERPRISES INT. INC.						
Principal Place of Business 2701 CRAWFORDVILLE HWY. CRAWFORDVILLE, FL 32327			Mailing Address PO BOX 669 SAINT MARKS, FL 32355			
2. Principal Place of Business		3. Mailing Address 8205 Sun Spring Cr.				
Suite, Apt. #, etc.		Suite, Apt. #, etc. Unit 12				
City & State		City & State Orlando, FL				
Zip	Country	Zip 32825	Country Orange	4. FEI Number 06-1677925		
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable		
6. Name and Address of Current Registered Agent LOPEZ GERENA, MARLIHAN 4 NE 1ST AVE. ORLANDO, FL 32801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 <u><i>Marlihan Lopez Gerena</i></u> <u><i>Marlihan Lopez Gerena</i></u> <u><i>5-20-05</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-appointing) DATE</small>						
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DE ARMAS, ARTURO L 2701 CRAWFORDVILLE HWY. CRAWFORDVILLE, FL 32327		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SOTOMAYOR, ROGER 2701 CRAWFORDVILLE HWY. CRAWFORDVILLE, FL 32327		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SOTOMAYOR, CARLOS 74 ANTLER RUN CRAWFORDVILLE, FL 32327		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>CBondabek</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<u><i>5-20-05</i></u> <small>Date Daytime Phone #</small>		

Attachment 5/18/05
P02000032202

40086335

To whom it may concern:

The reason I'm filing the application late is because the person who ran all this papers before was surprisedly sick, and he has been hospitalize since then. I'm trying to help to organize all the important papers and bills. Because he couldn't have time to explain me all this process. I'm just learning while I ask other people and making mistakes.

Thanks.
N. Lopez