

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091135

Entity Name: A.M.I. OF US, INC.

FILED
Feb 03, 2007
Secretary of State

Current Principal Place of Business:

2300 GULF BLVD
7
INDIAN ROCKS BEACH, FL 33785

New Principal Place of Business:

Current Mailing Address:

2204 1ST STREET
G
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

FEI Number: 51-0422155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENDALL, ANETTE
ONE BEACH DR SE
303
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

KENDALL, ANETTE
ONE BEACH DR SE # 303
303
ST PETERSBURG, FL 33701 US

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:

02/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: BRUNOTTE, GABRIELA
Address: 2204 1ST STREET # F
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: ST () Delete
Name: BRUNOTTE, INGRID
Address: 2204 1ST STREET # G
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GABRIELLA BRUNOTTE

P

02/03/2007

Electronic Signature of Signing Officer or Director

Date