2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000113056

City-St-Zip:

MIAMI, FL 33193

FILED Jan 16, 2006 Secretary of State

		AM INTERNATIONAL, CORP.		Secretary of State	
Current Principal Place of Business: 15322 SW 61 STREET			New Principal Place of	Business:	
MIAMI, FL 33193 Current Mailing Address:			New Mailing Address:		
RUBEN GA CARACAS VENEZUEL	ΖM	XX	780 NW 42 AVE STE 516 MIAMI, FL 33126 US		
FEI Number:	43-1988174	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
PIEDRA, AURELIO A 780 NW 42 AVE STE 420 CENTRE STE 516 MIAMI, FL 33126 US			PIEDRA, AURELIO A 780 NW 42 AVE STE 516 MIAMI, FL 33126 US	780 NW 42 AVE STE 516	
The above in the State		submits this statement for the pu	rpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: AURELIO A PIEDRA				01/16/2006	
	Electron	ic Signature of Registered Agen	t	Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () VARGAS, RUBE 15322 SW 61 S MIAMI, FL 331	STREET	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROJAS, MARIA 15322 SW 61 5 MIAMI, FL 331	STREET	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	D () ROJAS, RUBEN 15322 SW 61 S		Title: () Name: Address:	Change () Addition	

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.

City-St-Zip:

SIGNATURE: RUBEN VARGAS D 01/16/2006