## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000020600

FILED Apr 30, 2004 Secretary of State

Entity Name: AMERICAN INTERNATIONAL UNIVERSITY INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
141 NE 3F STE 406 MIAMI, FL				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
141 NE 3F STE 406 MIAMI, FL				
FEI Number	: 19-9449220	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
	NOREEN M			
6949 BAY APT. 1 MIAMI BE.	ORIVE ACH, FL 3314	1 US		
APT. 1 MIAMI BE. The above	ACH, FL 3314		purpose of changing its registered	d office or registered agent, or both,
APT. 1 MIAMI BE The above in the Stat	ACH, FL 3314 e named entity e of Florida.		purpose of changing its registered	d office or registered agent, or both,
APT. 1 MIAMI BE The above in the Stat	ACH, FL 3314 named entity e of Florida. RE:			d office or registered agent, or both,  Date
APT. 1 MIAMI BE. The above in the Stat SIGNATU	ACH, FL 3314 e named entity e of Florida. RE: Electro	submits this statement for the		
APT. 1 MIAMI BE. The above in the Stat SIGNATU  Election Ca	ACH, FL 3314 e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	ent	
APT. 1 MIAMI BE. The above in the Stat SIGNATU  Election Ca	ACH, FL 3314 e named entity e of Florida.  RE: Electrol mpaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution ( ).  CTORS:  ) Delete REEN M VE APT. 1	ent	Date

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: NOREEN HEFFRON D 04/30/2004