2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 05, 2006 08:00 AM Secretary of State

	ANNUAL		S C S 4 - 4 -			
DOCUMENT # P03000042609				Secretary of State		
AMERIC	A'S CONTRACTOR, INC.					
1 '	ce of Business TION AVENUE 33133	Mailing Address 3006 Aviation avenue 3A MIAMI, FL 33133				
}		[mim, 12 33133				
	of the statement of the state succession.		pro sum	03272008 No	o Chg-P C	FR2E034 (11/05)
L	OO NOT WRITE	IN THIS SPA	CE	4. FEI Number 90-0068728	3	Applied For Not Applicat
				5. Certificate of Stat	tus Desired [\$6.75 Additional Fee Required
DANTIN	6. Name and Address of Current Re	gistered Agent	{			e ulius score
PANTIN, I 3006 AVIA 3A	ATION AVENUE				OT WR	
MIAMI, FL	33133			IN IH	IS SPA	CE
5. The above	e named entity submits this statement for the trons of registered agent.	e purpose of changing its register	ed office or register	ed agent, or both, in th	ne State of Florida.	I am familiar with, and accep
SKGNATURE.		Te f applicable. (NOTE: Registere	d Agent signature required	ं जीवर संश्वासकारों}		DATE
Fil. After N	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		GO May Be ad to Fees	U00000493	3598	
10.	OFFICERS AND DIF	ECTORS		() 14	varanp-BN	313-806 150. 0 0
DILE NAME STREET ADDRESS CITY-ST-ZIP	P FULTON, STANLEY M 3008 AVIATION AVE SUITE 3-A MIAMI, FL 33133					
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STREET ADDRESS City-51-21P			j			
TITLE						
STREET ADDRESS CHY-ST-ZIP				DO NO	T WR	TE
TITLE NAME		,		IN THI	S SPA	CE
Sireet address City-St-Zip						
TISLE						
STREET ADDRESS City-St-Zip						
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; 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.

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NORME STREET ADDRESS OUTY-ST-ZP

STANCE FULTA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/06

Daytime Phone 9