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Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90189 032 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000031556 1. Entity Name AMI USA CORP					
Principal Place of Business 11055 SW 15 ST APT 206 PEMBROKE PINES, FL 33025			Mailing Address 11055 SW 15 ST APT 206 PEMBROKE PINES, FL 33025		
2. Principal Place of Business 11177 SW 8th STREET Suite, Apt. #, etc. APT. No. 308		3. Mailing Address P.O. BOX 260673 Suite, Apt. #, etc.		40069519 	
City & State PEMBROKE PINES, FL		City & State PEMBROKE PINES, FL		4. FEI Number 20-0736588	
Zip 33025		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AFEWORK, MAKONNEN 11055 SW 15 ST APT 206 PEMBROKE PINES, FL 33025				7. Name and Address of New Registered Agent Name MAKONNEN AFEWORK Street Address (P.O. Box Number is Not Acceptable) 11177 SW 8th STREET APT. No. 308 City PEMBROKE FL Zip Code 33025	
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 P.G. Makonnen Afevork DATE 04-27-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			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 P	NAME AFEWORK, MAKONNEN		TITLE PRESIDENT	NAME MAKONNEN AFEWORK	
STREET ADDRESS 11055 SW 15 ST	CITY-ST-ZIP PEMBROKE PINES, FL 33025		STREET ADDRESS 11177 SW 8th STREET, APT. 308	CITY-ST-ZIP PEMBROKE, FL 33025	
TITLE VICE PRESIDENT	NAME FRANCISCA AFEWORK		TITLE VICE PRESIDENT	NAME FRANCISCA AFEWORK	
STREET ADDRESS 11177 SW 8th STREET, APT. 308	CITY-ST-ZIP PEMBROKE, FL 33025		STREET ADDRESS 11177 SW 8th STREET, APT. 308	CITY-ST-ZIP PEMBROKE, FL 33025	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: P.G. Makonnen Afevork <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		