2007 **FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2007 8:00 am
Secretary of State
05-02-2007 90086 049 ***150.00

DOCUMENT # P05000025364

1. Entity Name
A+M FUN INC

DO NOT WRITE IN THIS SPACE

40100476

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2. Principal Place of Business	3. Mailing Address
10150 BELLE RIVE E	10150 BELLE RIVE E
Suite, Apt. #, etc. APT 2706	Suite, Apt #, etc. APT 2706
City & State JACKSONVILLE FL	City & State JACKSONVILLE FL
Zip 32256 Country USA	Zip 32256 Country USA

4. FEI Number 04-3806827 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent
Name AVI ZAGURI
Street Address (P.O. Box Number is Not Acceptable) 10150 BELLE RIVE E
APT 2706
City JACKSONVILLE FL Zip Code 32256

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.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PP	TITLE	
NAME	AVI ZAGURI	NAME	
STREET ADDRESS	10150 BELLE RIVE E APT 2706	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32256	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: AVI ZAGURI [signature] 4/22/07 (904) 651-2662