## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000068483

SUTTON, ROBERT

8954 HADOW WOOD BLVD.

CORAL SPRINGS, FL 33071

Name:

Address:

City-St-Zip:

FILED Jun 23, 2009 Secretary of State

Entity Nan	ne: AMERICA	N ENTREPRENEURS, INCO	RPORATI	ΞD			
Current Principal Place of Business:				New Principal Place of Business:			
	DOW WOOD E PRINGS, FL 33						
Current Mailing Address:				New Mailing Address:			
	DOW WOOD E PRINGS, FL 33						
FEI Number:	26-4521323	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate of Status D	esired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SUTTON, ROBERT W 8954 SHADOW WOOD BLVD. CORAL SPRINGS, FL 33071 US				BEAUCHAMP, RICHARD A 3600 N. FEDERAL HIGHWAY THIRD FLOOR FORT LAUDERDALE, FL 33308 US			
The above in the State		ubmits this statement for the p	ourpose of	changing it	s registered	d office or registered ag	ent, or both,
SIGNATUR	RE: RICHARD	A. BEAUCHAMP				06/23/2009	
	Electron	c Signature of Registered Ag	ent			Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive th	ne prior notice	<b>.</b>		
	AND DIRECT			ADDITION	S/CHANGE	ES TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	CHR () BOCCARD, VINO 9600 N.W. 36TH CORAL SPRING	I MANOR		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () BOCCARD, VINO 9600 N.W. 36TH CORAL SPRING	I MANOR		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CHR () SUTTON, ROBE 8954 HADOW V CORAL SPRING	OOD BLVD.		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition DBERT DW WOOD BLVD. RINGS, FL 33071	
Title:	T ()	Delete		Title:	Т	(X) Change ( ) Addition	

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

Name:

Address:

City-St-Zip:

SUTTON, ROBERT

8954 SHADOW WOOD BLVD.

CORAL SPRINGS, FL 33071

SIGNATURE: ROBERT SUTTON CHR 06/23/2009