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PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

7951 BOCA CIEGA DR



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P40855

(9)

Mailing Address

7951 BOCA CIEGA DR.

AMERICAN IDEAS CORPORATION, INC.

FILED Jan 15 1998 8:00am Secretary of State



ST. PETERSBURG BCH. FL 33706 ST. PETERSBURG BCH, FL 33706 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/05/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 39-1588776 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. ∏ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VOPAL, DEAN 7951 BOCA CIEGA DR. 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG BCH. FL 33706 83 84 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE CDP 1.1 TITLE Change VOPAL, DEAN NAME 1.2 NAME E034 STREET ADDRESS 7951 BOCA CIEGA DR. 1.3 STREET ADDRESS ST PETERSBURG BCH FL CITY - ST - ZIF 1.4 CITY - ST - ZIP DELETE Addition Change TITLE 2.1 TITLE VOPAL, DEAN NAME 2.2 NAME 7951 BOCA CIEGA DR. STREET ADDRESS 2.3 STREET ADDRESS ST PETERSBURG BCH FL 2. 4 CITY - ST-ZIP CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE VOPAL, JANENE NAME 3.2 NAME 7951 BOCA CIEGA DR. 3.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG BCH FL 3.4. CITY-\$1-ZIP CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE VOPAL, JANENE 4. 2 NAME NAME 7951 BOCA CIEGA DR. 4.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG BCH FL CITY -ST-ZIP 4.4 CITY-ST-ZIP DELETE Change __ Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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 13 if changes, or on an attachment with an address.

SIGNATURE:

33679090