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**Apr 27 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000000959 (6)

1. Corporation Name
~~AMERICAN MANAGEMENT, INC.~~
~~ABR Management of Daytona, Inc.~~

*n/c
2-25-98*



Principal Place of Business: 1260 NORTH ATLANTIC AVE. DAYTONA BEACH FL 32118
Mailing Address: C/O 2665 SOUTH BAYSHORE DR. SUITE 603 MIAMI FL 33133 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)
2a. Mailing Address (25-30)

3. Date Incorporated or Qualified: 10/30/1992
4. FEI Number: 59-3149907
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
MADORSKY, MARSHA G., ESQ.
2665 S. BAYSHORE DR., SUITE 603
MIAMI FL 33133

10. Name and Address of New Registered Agent (81-85)

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: CORRIGAN, JAMES	1.1 TITLE:	1.2 NAME:
STREET ADDRESS: 5665 ISLAND PARK DRIVE	CITY-ST-ZIP: MANOTICK ONTARIO CA	1.3 STREET ADDRESS:	1.4 CITY-ST-ZIP:
TITLE: VPD	NAME: MADORSKY, MAX	2.1 TITLE:	2.2 NAME:
STREET ADDRESS: 1260 N. ATLANTIC AVE.	CITY-ST-ZIP: DAYTONA BCH. FL	2.3 STREET ADDRESS:	2.4 CITY-ST-ZIP:
TITLE: VPD	NAME: MADORSKY	3.1 TITLE:	3.2 NAME:
STREET ADDRESS: 1260 N. ATLANTIC AVENUE	CITY-ST-ZIP: DAYTONA BEACH FL	3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
TITLE: S	NAME: MADORSKY	4.1 TITLE:	4.2 NAME:
STREET ADDRESS: 2665 S. BAYSHORE DRIVE	CITY-ST-ZIP: MIAMI FL	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
TITLE: T	NAME: MCELLIGOT	5.1 TITLE:	5.2 NAME:
STREET ADDRESS: 1260 N. ATLANTIC AVENUE	CITY-ST-ZIP: DAYTONA BEACH FL	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE:	NAME:	6.1 TITLE:	6.2 NAME:
STREET ADDRESS:	CITY-ST-ZIP:	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

TS
MADORSKY, MARSHA
2665 S. BAYSHORE DRIVE
MIAMI, FL.

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***150.00

14. 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 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)