## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000011694 (5)

AMERICAN FINANCIAL SERVICES CORPORATION OF SOUTH **FLORIDA** 

Principal Place of Business	Mailing Address			!				
2875 NE 191ST STREET	2875 NE 191ST STREET							
601 Aventura FL 33180	601 AVENTURA FL 33180-2833							
		MEMORY IE SHOPESS			3. Date Incorporated or Qualified 3a. Date of Last Report 02/16/1993 01/24/1996			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	1	<del> </del>	pplied For	
1	26	Suite, Apt. # letc.			65-0389226		Not Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional	
C4 8 C4	27	,					equired	
City & State	City & State			6. Election Campaign Financing			May Be	
Zip Country	[28] Z <sub>ID</sub>	Country		Trust Fund Contribution  8. This corporation has liability for	ar intensible		to Fees	
25	29	30		Florida Statutes	Yes	No	3. 189.032,	
g. Name and Address of Cui		1001		10. Name and Address of New		Agent		
CHISM, EDWARD M.	· · · · · · · · · · · · · · · · · · ·	81	Name					
2875 S. E. 191ST STREET		82	Street Add	Iress (P.O. Box Number is Not Accep	table)			
601			Oli Obli 7 lddi					
AVENTURA FL 33180		83						
		84	City			<b>85</b> Zip	Code	
			y		FL	,	0000	
<ol> <li>Pursuant to the provisions of Sections 607: office or registered agent, or both, in the S agent. Fam familiar with, and accept the of</li> </ol>	tate of Florida. Such charige was a	authorized by	the corpora	poration submits this statement for the ition's board of directors. I hereby acc	e purpose or cept the app	t changing i pointment as	its registered registered	
SIGNATURE					DATE		···	
Street at a contract of the area to the contract of the contra								
Signative: type that period darked registron  OFFICERS	AND DIRECTORS (NOT		nt signature requi	ired when reinstating)  ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12	
2. OFFICERS		13.	ni signature requi	ADDITIONS/CHANGES TO OF		DIRECTO		
2. OFFICERS	AND DIRECTORS	13.	nt signature requi					
2. OFFICERS ITLE D CHISM, EDWARD M II THEEF ADDRESS 21075 NE 34 AVE APT 104	AND DIRECTORS  DELETE	<b>13.</b> 1.1 TITLE						
2. OFFICERS  ITLE D CHISM, EDWARD M II TREET ADDRESS 21075 NE 34 AVE APT 104	AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME	ADDRESS					
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Jan 14 1997 8:00am

Secretary of State

3.5-933-8779

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