

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000016724 (5)

1. Corporation Name

AMERICAN COTTON, INC.



Principal Place of Business

1200 CLINTMOORE ROAD  
SUITE 1  
BOCA RATON FL 33438  
US

Mailing Address

1200 CLINTMOORE ROAD  
SUITE 1  
BOCA RATON FL 33487  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
03/04/1993

3a. Date of Last Report  
04/07/1995

4. FEI Number  
65-0391283

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

FRIEDMAN, ANDREW R  
5355 TOWN CENTER ROAD  
SUITE 801  
BOCA RATON FL 33486

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 (last name first) of registered agent or director or officer authorized to sign this statement.

(If the Registered Agent Signature is required when filing this statement, it must be typed or printed.)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
PSTD  
BATISTA WERNER  
7900 GLADES ROAD., SUITE 300  
BOCA RATON FL 33434

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE

TITLE  
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STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

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13.

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY- ST- ZIP

☐ Change ☐ Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY- ST- ZIP

☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY- ST- ZIP

☐ Change ☐ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY- ST- ZIP

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY- ST- ZIP

☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY- ST- ZIP

☐ Change ☐ Addition

800001831618  
-05/21/96--01039--034  
\*\*\*200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 this 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 for on an attachment with an address

SIGNATURE:

WERNER BATISTA  
PRESIDENT

04/09/96

407 995-4153

CR2E034 (12/95)