

3-9-98 B 2974 C  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE ANDREA B. MORTHAM Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P930000527633 (8)

1. Corporation Name  
AMERICAN VISA SERVICES, INC.

Principal Place of Business 1191 E. NEWPORT CENTER DRIVE 3RD FLOOR DEERFIELD BEACH FL 33442	Mailing Address 1191 E. NEWPORT CENTER DRIVE 3RD FLOOR DEERFIELD BEACH FL 33442
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1993

4. FEI Number

65-0464254

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1191 E. NEWPORT CENTER DR

Suite, Apt. #, etc.

22 112

City & State

23 DEERFIELD BEACH FL

Zip

24 33442

Country

25 USA

2a. Mailing Address

26 1166 W. NEWPORT CENTER DR

Suite, Apt. #, etc.

27 112

City & State

28 DEERFIELD BEACH FL

Zip

29 33442

Country

30 USA

9. Name and Address of Current Registered Agent

MCFLIKER, HENRY  
1191 E. NEWPORT CENTER DRIVE  
3RD FLOOR  
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DB	<input type="checkbox"/> DELETE
NAME	MCFLIKER, HENRY	
STREET ADDRESS	1191 E. NEWPORT CENTER DRIVE, 3RD FLOOR	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DB	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	McFLIKER, Henry	
1.3 STREET ADDRESS	1166 W. Newport Center Dr. Main Floor	
1.4 CITY-ST-ZIP	Deerfield Beach; FL. 33442	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 thereto.

CR2E034 (10/97)