2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000053106

Entity Name: AMERICAN SUPPLY 2000, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5485 NW 72ND AVENUE 5417 NW 72ND AVENUE MIAMI, FL 331664223 MIAMI, FL 331664223

Current Mailing Address: New Mailing Address:

C/O MAS C/O MAS

P O BOX 771210 3000 N. UNIVERSITY DRIVE SUITE E

CORAL SPRINGS, FL 330771210 CORAL SPRINGS, FL 33065

FEI Number: 65-0433390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, JOSEPH E MILLER, JOSEPH E 3000 N ÚNIVERSITY DRIVE 3000 N ÚNIVERSITY DRIVE STE E SUITE E CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33065 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

in the State of Florida.

SIGNATURE: 04/28/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

DAOUD, WADID Name: Name: DAOUD, WADID

P O BOX 771210 3000 N. UNIVERSITY DRIVE SUITE E Address: Address:

City-St-Zip: CORAL SPRINGS, FL 330771210 City-St-Zip: CORAL SPRINGS, FL 33065

Title: (X) Change () Addition Title: () Delete Name: Name: DAOUD, ALLYSON

DAOUD, ALLYSON

P O BOX 771210 3000 N. UNIVERSITY DRIVE SUITE E Address: Address: CORAL SPRINGS, FL 331771210 CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

ARGUELLO, CECILIA Name: MILLER, JOSEPH E Name: 5485 N.W. 72ND AVE. 3000 N. UNIVERSITY DRIVE SUITE E Address: Address:

City-St-Zip: MIAMI, FL 331664223 City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH E. MILLER 04/28/2008 Τ