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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****225.00 ****225.00

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CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # **P94000005518**
1. Corporation Name
AMREX, INC.

Principal Place of Business Mailing Address
635 N. WESTHORELAND ST 635 N. WESTHORELAND ST
ORLANDO, FL 32805. ORLANDO, FL 32805

2. Principal Place of Business 2a. Mailing Address
21 **635 N. WESTHORELAND ST** 26 **635 N. WESTHORELAND ST**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 **ORLANDO, FLORIDA** 28 **ORLANDO, FL**
24 **32805** 25 **ORANGE** 29 **32805** 30 **ORANGE**

3. Date Incorporated or Qualified 3a. Date of Last Report
4. FEI Number **59-3228727** 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
7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
FILINGS INC.
3732 N.W. 16TH ST.
FORT LAUDERDALE,
FLORIDA 33311

10. Name and Address of New Registered Agent
81 Name **SAME**
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

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 reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PRESIDENT	MOHAMED HASEEB HAFEZ	3624 HIGHHOLM COURT	ORLANDO, FL 32818-0000
SECRETARY	BHAUMIK V. PATEL	7808 AUTUMN WOOD DR	ORLANDO, FL 32825

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

TIS 4/19/95

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)(b), Florida Statutes. I further certify that the information indicated on the 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 Attachment with a cross

SIGNATURE: **Mohamed Haseeb Hafez** 4/7/95. 407-839-0209.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR