

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90215 046 ***158.75

DOCUMENT # P94000006374

1. Corporation Name
AMR SERVICES, INC.

Principal Place of Business
3770 LANTANA RD., #110
LANTANA FL 33462

Mailing Address
3770 LANTANA RD., #110
LANTANA FL 33462



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/1994

4. FEI Number
65-0471046

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 the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 8048 S Lake Dr

26 8048 S Lake Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 West Palm Bch FL

27 City & State

28 West Palm Bch FL

24 Zip

33406 25 Palm Bch

29 Zip

33406 30 Palm Bch

9. Name and Address of Current Registered Agent

RUSSO, CHARLES J
3770 LANTANA RD.,
#110
LANTANA FL 33462

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

West Palm Bch

FL

85 Zip Code

33406

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

4-24-99

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDT
RUSSO, CHARLES J
3770 LANTANA RD., #110
LANTANA FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VDS
RUSSO, JEAN D
3770 LANTANA RD., #110
LANTANA FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CUSTES, DAVID M
3770 LANTANA RD., #110
LANTANA FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RUSSO, ANGELO M
3770 LANTANA RD., #110
LANTANA FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PDT
CHARLES J RUSSO
8048 S LAKE DR
West Palm Bch FL 33406

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VDS
JEAN D RUSSO
8048 S LAKE DR
West Palm Bch FL 33406

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
NONE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
NONE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-99 561 5405058

CR2E034 (11/98)

0372804