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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P94000017665 (8)

AMERICAN INVESTMENT SERVICES OF BRANDON INC.

FILED Feb 17 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 710 OAKFIELD DRIVE 710 OAKFIELD DRIVE SUITE 208 SUITE 208 BRANDON FL 33511 BRANDON FL 33511-4924				Date Incorporated or Qualified					
						03/02/1994	02/	23/1996	
2. Principal 21	Place of Business	2a. Mailing Address				4. FEI Number 59-3181018			pplied For lot Applicable
Suite, Ap	t #, etc.	Suite, Apt. #, etc.							Additional
22		27				5. Certificate of Status Desired		Fee F	lequired
City & Sta 23	ale	City & State				Election Campaign Financing Trust Fund Contribution	7	-	May Be to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for	intangible		
24	25	29	30					No	
	9, Name and Address of Curr	ent Registered Agent				10. Name and Address of New Re	gistered /	igent	
	EDY, MICHAEL C.P.A.		l	B1	Name				
	30 W. BRANDON BLVD.		ŀ	82	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
	JITE 202			B3					
BF	VANDON FL 33511			53					
			ľ	84	City		E-1	85 Zip	Code
44 Durauan	t to the equipment of Postions 607.0	EO2 and EO7 1EO8 Elorida Étatut	oo the ab		nomed corne	oration submits this statement for the pon's board of directors. I hereby acce	FL	<u>abanaina</u>	ito registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title II applicable. (NOT ND DIRECTORS	E Registered	Ager	nt signature require	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TH	LE				Change	Addition
NAME	LANE, THOMAS B		1.2 NA	WE					
STREET ADDRESS		•	1.3 \$11	EET /	ADDRESS				
CITY - ST - ZIP	RIVERVIEW FL 33569		14 00	Y-ST	r-ZIP				
TITLE	ST	L] DELETÉ	2.1 TH					Change	Addition
NAME	MARTIN, JEAN	T 000	2.2 NA						
STREET ADDRESS	710 OAKFIELD DRIVE, SUITE BRONDON FL	E 200			ADDRESS				
CITY-ST-20P TITLE	BHONDON FL	DELETE	2. 4 CI 3.1 TIT		T-ZIP			Change	Addition
NAME		Luj Otterit	3.1 MA		1		ú.	சுவி வள்பிற	- radiality
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CI						
THLE		☐ DELETE	4.1 111					Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS	5		4.3 51	REET	ADORESS				
CITY-ST-ZIP			4.4 CH	Y-ST	T- ZIP				
TITLE	****	☐ DELETE	5.1 TIT				-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS	;		53511	REET	ADDRESS				
CITY-ST-ZIP			5 4 Cf	Y-\$1	r-21P				
TITLE		DELETE	6.1 TIT					Change	Addition
NAME			6.2 NA		,				
STREET ADDRESS	5		6.3 ST	REET	ADDRESS				
City-St-Zif			6.4 CIT	Y-\$1	T - ZIP				

14. I do 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

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