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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000068361

1. Corporation Name

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90084 049 ***158.75

	MERICAN, INC.					
	—· ,			1 1 1 1 1 1 1 1 1 1		
Principal Place	e of Business	Mailing Address			10 6)101 18180 11118 9	
430 NW 38 STREET 430 N.W. 38TH STREET						
BOCA RATON FL 33431 BOCA RATON FL 33431					10.001.05	
US				DO NOT WRITE IN TH	IS SPACE	
1				3. Date Incorporated or Qualifed		}
	<u> </u>			09/12/1994 4. FEI Number		lied For
	lace of Business	2a. Mailing Address		1	 +	Applicable
21		26		65-0554714	\$8.75 At	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired 🗹	Fee Req	
22 City 8 Stat		City & State		a Flatin Compain Financing	\$5.00 N	
City & State	.	⊢, `		6. Election Campaign Financing Trust Fund Contribution	Added to	
Zip	Country		Country	This corporation owes the current year		1.000
<u></u>			30	Personal Property Tax.		⊐No Í
24	9. Name and Address of Currer			10. Name and Address of New Registere		
	3. Italie and Address of Cure	III LOBINIO CO CHOIN	81 Name			
SMA	LL, HARRY L		<u> </u>			
	N.W. 38TH STREET		82 Street A	ddress (P.O. Box Number is Not Acceptable)		}
	A RATON FL 33431		83		<u> </u>	
. 555						
	•		84 City	· F	■ 85 Zip C	ode
	4- 41 i-i of Stions 607.050	02 and 607 1509 Florida Statuto	e the above named o	orporation submits this statement for the purpose		egistered
office or r	egistered agent or both in the State	of Florida. Such change was au	thorized by the corpor	ation's board of directors. I hereby accept the app	ointment as reg	istered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statutes.	·	-	- 1
SIGNATURE	• •					
		THOUSE IS NOT THE PARTY OF THE	No sister of Asset signature rea	DATE		<u> </u>
40	Signature, typed or printed name of registered age		Registered Agent signature req		AND DIRECTOR	RS IN 12
12.	OFFICERS AN	ND DIRECTORS	13.	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
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14. 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 chapted, open an attachment with an address, with all other like empowered.

SIGNATURE:

VATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR