

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000072935 (7)

1. Corporation Name

AMERICA INTERNATIONAL OF CENTRAL FLORIDA, INC.



Principal Place of Business

5633 18TH WAY SOUTH
APT. E
ST PETERSBURG FL 33712
US

Mailing Address

5633 18TH WAY SOUTH
APT. E
ST PETERSBURG FL 33712

3. Date Incorporated or Qualified
10/04/1994

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 1727 ARMISTEAD PL. South 26 1727 ARMISTEAD PLACE S.

4. FEI Number
59-3272715

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

City & State

City & State

23 St. Petersburg, FL 28 St. PETERSBURG, FL

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 33712 25 U.S.A. 29 33712 30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name KANAZIRSKI, ALEXANDER
82 Street Address (P.O. Box Number is Not Acceptable)
1727 ARMISTEAD PLACE South
83
84 City St. PETERSBURG FL 85 Zip Code 33712

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

Alexander Kanazirski, Director of Finance 04/29/96

Signature, typed or printed name of registered agent and title, as applicable

(NOTE: Registered Agent signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME KANAZIRSKI, ALEXANDER
STREET ADDRESS 5633 18TH WAY SOUTH, APT. E
CITY-ST-ZIP ST PETERSBURG FL 33712

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME KANAZIRSKI, ALEXANDER
1.3 STREET ADDRESS 1727 ARMISTEAD PLACE SOUTH
1.4 CITY-ST-ZIP St. PETERSBURG, FL 33712

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(k), 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.

SIGNATURE:

Alexander Kanazirski 04/29/96 (SIS) 8671104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)