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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Morthani Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

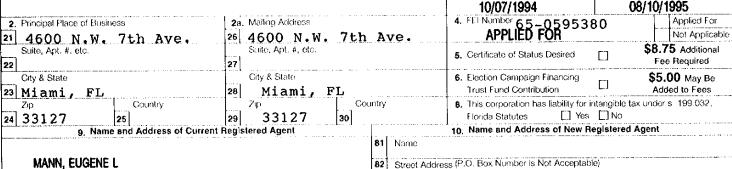
1. Corporation Name

P94000074856 (3)

AMFRIFIRST	ECD	INC	

Principal Place of Businoss 12920 S.W. 81ST STREET MIAMI FL 33183 Mailing Address

12920 S.W. 81ST STREET MIAMI FL 33183



MANN, EUGENE L 12920 S.W. 81ST STREET MIAMI FL 33183

	64	١	City	FL [8] ZIP COO
11.	Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-	n	arned corporation submits this	s 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 corp	ρ¢	pration's board of directors. If	nereby accept the appointment as registered agent. I am

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12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
THTLE	D	🗽) DELF1E	1. 1 101.00		Change	Addition	
NAME	MANN, EUGENE L		1.2 NAME	WRIGHT, SONNY			
\$1REE1 ADDRESS	12920 S.W. 81ST STREET		1.3 STREET ADDRESS	4600 N.W. 7th Ave.			
CITY - ST - ZIP	MIAMI FL 33183		1.4 C-TY - ST - Z:P	Miami, FL 33127			
TITLE		[] DELETE	2 1 1011		Change	Addition	
NAME			2.2 NAME	•			
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY+ S1+ ZIP				
TITLE		DELETE	3. 1 TITLE		Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
C(TY+S1-7(P			3.4 CiTY-ST-ZIP				
TITLE		["] DELETE	4.131168		Change	Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADORESS				
CITY-ST-7iP			4.4 CITY-ST-ZIP				
TITLE		[] DELETE	5. 1 TOLE		[_] Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5 4 CITY - S1 - ZIP				
TITLE		[] DELETE	6 1 Title		☐ Change	[] Addition	
NAME			62 NAME				
STREET ADDRESS			63 STREET ADDRESS				
CITY-ST-7-P			6.4 CHY-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 arimus' reject or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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

JOHNE WAS A SIGNATURE AND TYPED OF PRINCED IN

Sonny Wright

4/25/96

(305) 751-864

. . . .

3a. Date of Last Report

3. Date Incorporated or Qualified

Daytine Phone #

CR2E034 (12/95)