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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORÍDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000007094 (2)

## AMERICAN AUTOMOTIVE ENGINEERING, INC.

Principal Piace of Business Mailing Address

**FILED** May 06 1997 8:00am Secretary of State



14260 SW 139 COURT MIAMI FL 33186		14280 SW 139 COURT MIAMI FL 33186-5516						
		·				3. Date incorporated or Qualified 01/23/1995	3a. Date of Last 04/30/1996	Report
2. Principal Pr	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	P	pplied For
21		26	26			65-0574072		lot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired Section		
City & State	0		City & State			6. Election Campaign Financing	\$5.00	) May Be
23		28	28			Trust Fund Contribution		
Zφ	Country	Zip	Country .			8. This corporation has liability for i	ntangible tax under	s. 199.032,
24	25	29	30			Florida Statutes 🔀 Yes 🗀 No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
I FF	, DAVID		8	1	Name			
. 14260 SW 139 COURT			8	32 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33186			8	3	<del></del>			
				4	City FL 85 Zip Code			Code
11 Pursuant	to the provisions of Sections 607	0502 and 607 1508 Florida Statute	s the aho	J.	named corn	oration submits this statement for the p		its registered
office or r agent if a	registered agent, or both, in the S im familiar with, and accept the ol	itate of Florida. Such change was a bligations of, Section 607.0505, Flo	uthorized I rida Statut	by es.	the corporation	ion's board of directors. I hereby accep	I the appointment a	s registered
SIGNATURE								
	Signature, type() or printed name of registered agent and title if applicable. (NOTE: Regist			เสียน	t signature require	ed when reinstating)	DATE	50 11 10
12.	,	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TOLE	D	☐ DELETE	1.1 TITLE		·		Change	Addition
NAME	LEE, DAVID		1.2 NAM	1.2 NAME				
STREET ADDRESS				1.3 STREET ADORESS				1
CITY-ST-7@	MIAMI FL 33186		1.4 CITY	- ST	- ZIP			
TITLE		☐ DELETE	2.1 TITLE	Ξ			∐ Change	Addition
NAME			2.2 NAM	2.2 NAME				
STREET ADDRESS			2.3 STRE	ET #	ADDRESS			
CITY-ST-ZIF				2. 4 CITY-ST-ZIP				
THLE	☐ DELETE			3.1 TITLE			Change	Addition
NAME			3.2 NAM	Ε				
STREET ADDRESS	ļ		3.3 STRE	ET A	ADDRESS			
CITY-S1-7IP			3.4. CITY	/- \$1	1-ZIP			
THE				E			Change	Addition
NAME			4. 2 NAM	AE.				
STREET ADORESS			4.3 STRE	ET A	ADORESS		_	
CITY - ST - 7IP			4.4 CITY				<i>ي</i> ر (	
THIE	I			5.1 TITLE		0.44	☐ Change	Addition
NAME			1 .	5.2 NAME		An		
STREET ADDRESS					ADDRESS	× 6Λ	)	
C/TY-ST-ZIP			5.4 CITY		1	3		
TITLE		☐ DELETE	6.1 T(TL)				Change	Addition
NAME	i i		E	6.2 NAME		40000217		
					address	40000217 -05/13/97010	73029	
STREET ADDRESS					ŧ	***165.00	io oro	
CFTY - ST - ZIP			6.4 CITY	- 51	:-ZIY	<u> </u>		

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 reference 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 a attachment with an address.

20 CHIRED

Daytime Phone #