

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P95000008844  
 1. Entity Name  
**AMERICAN INVESTMENTS ENTERPRISES COMPANY**



Principal Place of Business Mailing Address  
 2800 NW 32 AVE 2945 NW 21 TERR  
 MIAMI, FL 33142 US MIAMI, FL 33142 US

**DO NOT WRITE IN THIS SPACE**



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For  
 65-0599257 Not Applicable

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

6. Name and Address of Current Registered Agent  
 BABUN, JOSE J  
 2945 NW 21 TERRACE  
 MIAMI, FL 33142

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

000000882312  
 04/16/08-80035-023 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	BABUN-SELMAN, JOSE
STREET ADDRESS	3160 NW 14TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	VSD
NAME	BABUN, JOSE JESUS
STREET ADDRESS	12711 NW 6TH STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	VTD
NAME	BABUN, SARA CRISTINA
STREET ADDRESS	9250 SW 69TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Jose J. Babun 4-3-08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #