

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

FILED
May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000010476 (6)

1. Corporation Name

A.M.B. INDUSTRIES, INC.

Principal Place of Business

7506 SW 26TH CT
DAVIE FL 33314

Mailing Address

7506 SW 26TH CT
DAVIE FL 33314-1001



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/06/1995		3a. Date of Last Report 03/20/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0547996		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BULASEY, PERLA 7506 SW 26TH CT DAVIE FL 33314				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			

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		Signature, typed or printed name of registered agent and title, if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE									
12. OFFICERS AND DIRECTORS								13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	P	BUCASEY, PERLA						11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME		7506 S.W. 26 CT.						12 NAME							
STREET ADDRESS		DAVIE FL 33314						13 STREET ADDRESS							
CITY-ST-ZIP								14 CITY-ST-ZIP							
TITLE		<input type="checkbox"/> DELETE						21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME								22 NAME							
STREET ADDRESS								23 STREET ADDRESS							
CITY-ST-ZIP								24 CITY-ST-ZIP							
TITLE		<input type="checkbox"/> DELETE						31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME								32 NAME							
STREET ADDRESS								33 STREET ADDRESS							
CITY-ST-ZIP								34 CITY-ST-ZIP							
TITLE		<input type="checkbox"/> DELETE						41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME								42 NAME							
STREET ADDRESS								43 STREET ADDRESS							
CITY-ST-ZIP								44 CITY-ST-ZIP							
TITLE		<input type="checkbox"/> DELETE						51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME								52 NAME							
STREET ADDRESS								53 STREET ADDRESS							
CITY-ST-ZIP								54 CITY-ST-ZIP							
TITLE		<input type="checkbox"/> DELETE						61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition					
NAME								62 NAME							
STREET ADDRESS								63 STREET ADDRESS							
CITY-ST-ZIP								64 CITY-ST-ZIP							

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 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:

Perla Bucasey 02/23/97 9547609555

CR2E034 (9/96)