

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90100 008 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028030

1. Corporation Name
AMERICAS INTERNATIONAL SECURITIES CORP.



Principal Place of Business
~~4901 NW 17TH WAY~~
~~#405~~
~~FORT LAUDERDALE FL 33309~~

Mailing Address
~~4901 NW 17TH WAY~~
~~#405~~
~~FORT LAUDERDALE FL 33309~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/07/1995

4. FEI Number
65-0714288

Applied For
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21 3840 W. HILLSBORO BLVD
Suite, Apt. #, etc.
22 PMB 206
City & State
23 DEERFIELD BEACH FL
Zip Country
24 33442 25 USA

2a. Mailing Address
26 3840 W. HILLSBORO BLVD
Suite, Apt. #, etc.
27 PMB 206
City & State
28 DEERFIELD BEACH FL
Zip Country
29 33442 30 USA

9. Name and Address of Current Registered Agent
~~PARADISO, DON A~~
~~5874 DEERFIELD PLACE~~
~~LAKE WORTH FL 33463~~

10. Name and Address of New Registered Agent
81 Name
FRED E. MORGENSTERN
82 Street Address (P.O. Box Number is Not Acceptable)
3840 W. HILLSBORO BLVD PMB 206
83
84 City
DEERFIELD BEACH FL
85 Zip Code
33442

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 FRED E. MORGENSTERN 04/28/99 DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
M	FRED E MORGENSTERN	4901 NW 17TH WAY #407	FT LAUDERDALE FL 33309	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
		3840 W. HILLSBORO BLVD PMB 206	DEERFIELD BEACH FL 33442	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I 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, with all other like empowered.

SIGNATURE: FRED E. MORGENSTERN 04/28/99 DATE 954.557.3651 DAYTIME PHONE #

CR2E034 (11/98)