

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047801

FILED
Feb 16, 2009
Secretary of State

Entity Name: A.M.P. ENTERPRISES AND INVESTMENTS, INC.

Current Principal Place of Business:

POST OFFICE BOX 10
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

Current Mailing Address:

POST OFFICE BOX 10
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YATES, BERNARD
Address: PLANTA 4-#2 EDIFICIO IBERIA, PLAYA LAVANTE
City-St-Zip: ALICANTE, SPAIN,

Title: V () Delete
Name: LLOYD, RICHARD
Address: PLANTA 4-#2 EDIFICIO IBERIA, PLAYA LAVANTE
City-St-Zip: ALICANTE, SPAIN,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD LLOYD

V

02/16/2009

Electronic Signature of Signing Officer or Director

Date