FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P95000084079 (9)

1. Corporation Name

AMERICAN FINANCIAL HOLDINGS INC.

Principal Place of Business
7059 GENEVA LAKES COURT
LAKE WORTH FL 33467

Mailing Address
7059 GENEVA LAKES COURT
LAKE WORTH FL 33467

3. Date Incorporated or Qualified: 11/02/1995
3a. Date of Last Report: N/A

2. Principal Place of Business — 21
Suite, Apt. #, etc — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 65-0617305 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BLVD.
SUITE 211
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name: Thomas J Craft Jr. / Craft Associates
82 Street Address (P.O. Box Number is Not Acceptable): 11000 Prosperity Farms RD #300
83 Palm Beach Gardens
84 City: FL 85 Zip Code: 33410

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] Craft Associates 5/1/96
Signature, typed or printed name of registered agent, and title if applicable — Name of Registered Agent (typed or printed) — DATE

12. OFFICERS AND DIRECTORS

TITLE	D ☒ DELETE
NAME	DRESNER, ROBERT
STREET ADDRESS	% 4521 PGA BLVD. SUITE 211
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director ☐ Change ☒ Addition
1.2 NAME	Dominic Scacci
1.3 STREET ADDRESS	7059 Geneva Lakes CT
1.4 CITY-ST-ZIP	Lake Worth Fl. 33467
2.1 TITLE	President ☐ Change ☒ Addition
2.2 NAME	Dominic Scacci
2.3 STREET ADDRESS	7059 Geneva Lakes CT.
2.4 CITY-ST-ZIP	Lake Worth Fl. 33467
3.1 TITLE	Secretary ☐ Change ☒ Addition
3.2 NAME	Leon P. Wilde
3.3 STREET ADDRESS	7059 Geneva Lakes CT.
3.4 CITY-ST-ZIP	Lake Worth Fl. 33467
4.1 TITLE	Director ☐ Change ☒ Addition
4.2 NAME	Leon P. Wilde
4.3 STREET ADDRESS	7059 Geneva Lakes Ct.
4.4 CITY-ST-ZIP	Lake Worth Fl. 33467
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	900001898889
5.3 STREET ADDRESS	-07/19/96--01007--020
5.4 CITY-ST-ZIP	***225.00
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

7-18-96

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further, I certify that the information indicated on this annual report or supplement to 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 is added in an attachment with an address.

SIGNATURE: [signature] 3/1/96 407-968-0431
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #
Dominic Scacci