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FILED
Sep 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000054547 (0)

1. Corporation Name

AMERICAN INVENTORY RESOURCE CORP.



Principal Place of Business

Mailing Address

4472 N.E. 11TH AVENUE
OAKLAND PARK FL 33334

4472 N.E. 11TH AVENUE
OAKLAND PARK FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1996

2. Principal Place of Business

21 1150 NW 54th Street

2a. Mailing Address

26 1150 NW 54th Street

Suite, Apt. #, etc.

(Rear)

Suite, Apt. #, etc.

(Rear)

City & State

23 Fort Lauderdale, FL

City & State

28 Fort Lauderdale, FL

Zip

24 33309

Country

25 US

Zip

29 33309

Country

30 US

4. FEI Number

65-0679673

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SHEPARD, MURRAY E
409 S.E. 7TH STREET
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

Brian Deuschle, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

800 SE 3rd Avenue

83

Suite 400

84

Fort Lauderdale, FL

85 Zip Code

33316

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, 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

CHRISTOPHER MASH - President

9-17-98

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MASH, CHRIS
STREET ADDRESS 4472 N.E. 11TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL 33334

TITLE VD ☒ DELETE

NAME NAVARRO, DANNY
STREET ADDRESS 4472 N.E. 11TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL 33334

TITLE STD ☒ DELETE

NAME CANTIN, RICHARD
STREET ADDRESS 4472 N.E. 11TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL 33334

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE

CHRISTOPHER MASH

9-17-98

954938/912

CR2E034 (10/97)