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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000080139 (4)

A.M.E. CAPITAL, INC.

Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.   Suite, Apt #, etc.   Sc. Certificate of Status Desired   \$8.75 Additional Fee Required	Principal Place of	of Business	Mailing Address				BOFOT COST BUILD WEND INTO	
2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. A fell number 3. 3954 Strick land C+ 25								
Suite, Apt #, etc.  Suite,								eport
27   S. Certificate of Status Desired   Fee Required   Fee Requi							4 Ap	<del> </del>
Superior of 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 of 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.   Superior of Sup	22	elc.	27			5. Certificate of Status Desired	<b>7</b>	
Superior of 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the objective dagent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the objective dagent, 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 object the object on 607.0505, Florida Statutes.  SIGNATURE   Superior by 1.3 or pented harms of registered agent accept the object of the object o	23 Lake 10		28 Highland C'	ty , F	-1	, , ,	P	
KNAPP, STEPHEN M 5417 S FLORIDA AVE LAKELAND FL 33813  82 Street Address (P.O. Box Number is Not Acceptable)  83   B4 City   FL   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	<sup>Zip</sup> 3381	3 25 USA				Florida Statutes	Yes No	199.032,
Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   City   FL   85   Zip Code   82   City   FL   85   Zip Code   83   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   City   FL   85   Zip Code   81   City   FL   85   Zip Code   82   City   FL   85   Zip Code   83   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   City   FL   85   Zip Code   81   City   FL   85   Zip Code   82   City   FL   85   Zip Code   83   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   80   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   City   FL   85   Zip Code   81   City   FL   85   Zip Code   82   City   FL   85   Zip Code   82   City   FL   85   Zip Code   83   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   80   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   City   FL   85			nt Registered Agent			10. Name and Address of New Re	gistered Agent	
Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature  Signature  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. ITILE  ALDERMAN, WENDY F  P 0 BOX 736 N/A  HIGHLAND CITY FL 33846  1.4 City-S1-Zip  DELETE  1.1 TITLE  Change  Addition  Addition  SIRRET ADDRESS	KNAPP	, stephen M		81	Name			
LAKELAND FL 33813  83  84 City  FL 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature Signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  ALDERMAN, WENDY F  P O BOX 736 N/A  HIGHLAND CITY FL 33846  1.4 City SI-2IP  BELETE  1.1 TITLE  Change  Addition  Addition  SIRRET ADDRESS	1				82 Street Address (P.O. Box Number is Not Acceptable)			
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D ALDERMAN, WENDY F STREET ADDRESS CITY-S1-7IP HIGHLAND CITY FL 33846  DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-S1-7IP DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	11. Pursuant to office or reg agent. Lam	the provisions of Sections 607.050 istered agent, or both, in the State familiar with, and accept the oblig	02 and 607.1508, Florida Statutes, of Florida. Such change was aut ations of, Section 607.0505, Florid	the above horized by la Statute	e-named of the corposit	corporation submits this statement for the poration's board of directors. I hereby accep		s registered registered
12. OFFICERS AND DIRECTORS IN 12  TITLE  NAME ALDERMAN, WENDY F STREEL ADDRESS CITY-SI-7IP HIGHLAND CITY FL 33846  DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-7IP TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS 3.4 CITY-ST-7IP  Change Addition Addition Addition Addition Addition	SIGNATURE	Stephen ID. K	napp				1-90-71	
TITLE DELETE 1.1 TITLE Change Addition  ALDERMAN, WENDY F STREET ADDRESS CITY-S1-7IP HIGHLAND CITY FL 33846  DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-7IP  DELETE 2.1 TITLE 2.2 NAME 2.2 NAME STREET ADDRESS STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS	<del></del>				nt signature r			C IN 12
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STREET ADDRESS			<u> </u>				Undinge .	- Audalon
CITY-S1-7IP   HIGHLAND CITY FL 33846				7.2 7.1 No.	ADDRESS			
TITLE DELETE 2.1 TITLE Change Addition  NAME 2.2 NAME 2.3 STREET ADDRESS 2.3 STREET ADDRESS	L							
NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS			DELETE		1 - 211		Change	Addition
STREET ADDRESS 2.3 STREET ADDRESS	NAME		<del></del>					
EN OTHER PROPERTY	STREET ADDRESS				ADORESS			
	CITY+ST-ZIP							

14. If 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 angual 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4 2 NAME

51 TITLE

52 NAME

6.1 TITLE

62 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

44 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE

THEF

NAME

THEF

NAME

1 TLF

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - \$1 - 2(F

CITY-ST-ZP

C014-S1-Z01

HATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DELETE

DELETE

☐ DELETE

DELETE

4/23/97

941 6464810

Change

Change

Change

Change

Addition

Addition

Addition

Addition

**FILED** 

Apr 29 1997 8:00am

Secretary of State