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FILED
Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000103953 (1)

1. Corporation Name

AMERICAN PROMOTIONS, INC.

Principal Place of Business
11710 NW S RIVER DR STE 216
MEDLEY FL 33178

Mailing Address
11710 NW S RIVER DR STE 216
MEDLEY FL 33178

3. Date Incorporated or Qualified
12/23/1996

3a. Date of Last Report

4. FEI Number

65-0722632

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

ARAN, FERNANDO S
710 S DIXIE HWY
CORAL GABLES FL 33148

10. Name and Address of New Registered Agent

81 Name

82 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 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ PRESIDENT ☐ DELETE
NAME BATISTA, ARNALDO FERNANDEZ
STREET ADDRESS 11710 NW S RIVER DR STE 216
CITY- ST- ZIP MEDLEY FL 33178

TITLE ☐ DIRECTOR ☐ DELETE
NAME FERNANDEZ, GLADYS
STREET ADDRESS 1170 NW S. RIVER DR. #216
CITY- ST- ZIP MEDLEY FL 33178

TITLE ☐ VICE-PRESIDENT, SECRETARY ☐ DELETE
NAME FERNANDEZ, IRIS M.
STREET ADDRESS 11710 NW S. RIVER DR. #216
CITY- ST- ZIP MEDLEY FL 33178

TITLE ☐ VICE-PRESIDENT ☐ DELETE
NAME FLUTIE, GLENN A.
STREET ADDRESS 5330 SW 14 ST
CITY- ST- ZIP PLANTATION FL 33317

TITLE ☐ TREASURER ☐ DELETE
NAME GONZALEZ, SERGIO L.
STREET ADDRESS 7278 BEDLINGTON RD.
CITY- ST- ZIP MIAMI LAKES FL 33014

TITLE ☐ DIRECTOR ☐ DELETE
NAME VOGELSANG, MARK
STREET ADDRESS 520 WATERMARK ST. #101
CITY- ST- ZIP DANIA FL 33004

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 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 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:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-97

Date

Daytime Phone # 0012333

CR2E034 (9/96)