

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

**FILED**

**May 04 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 # P97000041791 (9)**

1. Corporation Name  
**AMDG ENTERPRISES, INC.**



Principal Place of Business  
**7231 SW 140TH AVE  
MIAMI FL 33183-3149**

Mailing Address  
**7231 SW 140TH AVE  
MIAMI FL 33183-3149**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/13/1997**

2. Principal Place of Business  
21 **7800 NW 32nd Street**

2a. Mailing Address  
26 **7800 NW 32nd Street**

4. FEI Number  
**65-0761314**

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 City & State  
**Miami FL**

27 City & State  
**Miami FL**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 Zip  
**33122**

25 Country  
**USA**

29 Zip  
**33122**

30 Country  
**USA**

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

10. Name and Address of New Registered Agent

**ORTIZ, IVAN F  
7231 SW 140TH AVE  
MIAMI FL 33183-3149**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
**7800 NW 32nd Street**

83

84 City  
**Miami**

FL

85 Zip Code  
**33122**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PTD**  DELETE  
NAME **ORTIZ, IVAN F**  
STREET ADDRESS **7231 SW 140TH AVE**  
CITY-ST-ZIP **MIAMI FL 33183-3149**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **VSD**  DELETE  
NAME **ORTIZ, ROSEMARIE A**  
STREET ADDRESS **7231 SW 140TH AVE**  
CITY-ST-ZIP **MIAMI FL 33183-3149**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
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: *Ivan Ortiz* **4/29/98 (205) 581-8140**

CR2E034 (10/97)