

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000048853

1. Entity Name

AMERICAN AUTOMOTIVE ENTERPRISES, INC.



Principal Place of Business

1304 N. MARYLAND AVE.
PLANT CITY FL 33566

Mailing Address

P.O. BOX 91122
LAKE LAND FL 33804
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

1st MOORE

CR2E034 (10/04)

City & State

City & State

4. FEI Number

59-3449850

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAILEY, A. WILLIAM III
1304 N. MARYLAND AVE.
PLANT CITY FL 33566

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME KILGORE, JOHN M II
STREET ADDRESS 1304 N. MARYLAND AVE.
CITY-STATE-ZIP PLANT CITY FL 33566

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
U00000342070
04/29/05-80040-024 150.00

TITLE M
NAME GOLDEN, GREGORY L
STREET ADDRESS 1129 LAKE DEESON PT.
CITY-STATE-ZIP LAKE LAND FL 33805

TITLE
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CITY-STATE-ZIP

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William A. Bailey III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/05

Date

863-688-381

Daytime Phone #