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

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000083366 (9)

**FILED** Jan 22 1998 8:00am Secretary of State

AMERI	CAN ENTERPRISES, INC.							
Principal Plac	ce of Business	Mailing Address				-{		
4012 MCKAY CIRCLE 4012 MCKAY CIRCLE								
LARGO FL 33770 LARGO FL 33770							_	
Į.						DO NOT WRITE IN THIS S	SPACE	
İ						3. Date Incorporated or Qualified		j
2. Principal Place of Business 2s. Mailing Address						09/26/1997 4. FEI Number		
21 26						59- 3469896	<b>⊢</b>	oplied For of Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	
22						5. Certificate of Status Desired	Fee Re	I
City & Sta	le	City & State	City & State		<del>-</del>	6. Election Campaign Financing	\$5.00	<u> </u>
23	28					Trust Fund Contribution	Added t	
Zip	Country Zip Co		Cou	intry		8. This corporation owes or has paid the curr	rent year Int	angible
24	25	29	30			1		No
g, Name and Address of Current Registered Agent						10. Name and Address of New Registered	igent	
	DAN, ROBERT G			81	Name			
4012 MCKAY CIRCLE				62	Street Addre	ss (P.O. Box Number is Not Acceptable)		
LARGO FL 33770				83				
				83				
<u> </u>				84	City	<b>—</b>	85 Zip (	Code
44 Parsuant	to the provisions of Postions 607 06/	02 and 607 1509. Florida State	ton the n	DO:/0	nomod aeroo	FL	phonoine it	o societored
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.								
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								1
SIGNATURE	Signature, typed or printed name of registered ag	ont and tyle if applicable (NC	TE Benistere	d Agent	Ls poalure required	d when reinstating) DATE		
12.		ID DIRECTORS	13.		r og ratar r r cqs r r	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	P	DELETE	1.1 Ti	TLE			Change	Addition \$
NAME	DOAN, ROBERT G		1.2 NAME		Ì			13
STREET ADDRESS	4012 MCKAY CIRCLE	1.3 ST		TREET A	ADDRESS			18
CITY-ST-ZIP	LARGO FL 33770			TY-ST	- ZIP			
TITLE		DELETE 2.1		TLE	ľ		Change	Addition C
NAME		2.2 N		AME				}
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TITLE		☐ DELETE	3.1 TITLE				L Change	Addition
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CITY-ST-ZIP TITLE			4.1 TI	11Y-ST	- ZIP		Change	Addition
NAME		- Partie	4. 2 NAME					
STREET ADDRESS					DDBESS			1
CITY-ST-ZIP			1	4.3 STREET ADDRESS 4.4 CITY-SY-ZIP				ì
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE		5.1 TITLE			Change	Addition
NAME			1	5.2 NAME			_ •	_
STREET ADDRESS				5.3 STREET ADDRESS				1
CITY-ST-ZIP				5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TH				Change	Addition
NAME			5.2 NA	AME				
STREET ADDRESS			6.3 ST	ireet ai	DDRESS			
CITY-ST-ZIP				TY-ST-				
14. I hereby	certify that the information supplied w	ith this filing does not qualify f	or the exe	emptio	on stated in Si	ection 119.07(3)(i), Florida Statutes. I further cer	tify that the	information

Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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.