2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000096887

1. Entity Name

AMERICAN INVESTMENT PROPERTIES, INC.



FILED May 09, 2007 8:00 am Secretary of State

05-09-2007 90107 014 ***150.00

					COO WY	THE						
Principal Place of Business 3300 SW 14TH PLACE, UNIT 3 BOYNTON BEACH, FL 33426-9034			Mailing Address 3300 SW 14TH PLACE, UNIT 3 BOYNTON BEACH, FL 33426-9034					III 82 112 18118 1	IJI n a a n ena anare ar n	18 3 141 1 161		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04252007	Chg-P	CR2E	034 (12/06)		
City & State			City & State			4. FEI Numb	•			plied For t Applicable		
Zìp	Country		Zip	Count			5. Certificate	of Status Desired		\$8.75 Add Fee Require		
	6. Name an	d Address of Current R			7. Name and	d Address of New F	Registered	Agent				
SCHONE, LARRY 151 NW 1ST AVE DELRAY BEACH, FL 33444						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 a the obligations of registered agent.										and accept		
SIGNATURE							when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financin Trust Fund Contribution.							.00 May Be ed to Fees					
10.		IRECTORS	11.			ADDITIONS	/CHANGES TO OF	FICERS AN	D DIRECTORS	S IN 11		
NAME STREET ADDRESS		ALPH P TH PLACE, UNIT 3 BEACH, FL 33426903	□ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS	DVST MULLER, KE 3300 SW 14	<u>. </u>	⊠ Delete							Change	Addition	
NAME STREET ADORESS		DN, JOHN TH PLACE, UNIT 3 BEACH, FL 33426903	□ Delete			D	ST			☐ Change	X Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete			Ņ	V ,			□ Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-07

561-364-2707