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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000101451

1. Corporation Name

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90153 019 \*\*\*150.00

AMERICA	A THUCKING CORP.										
Principal Place	e of Business	Mailing Add	ress				4 IDEXIDE: IND. (MAIN ANNI MOIN BRIN ANNI A		AIABI E	101 1101 1191	
7706 AVALON I	RD	77 <b>0</b> 6 AVALO	7706 AVALON RD WINTER GARDEN FL 34787								
MINICIA CHINDLE I L 04/01							DO NOT WRITE IN THIS	SPACE			
							3. Date Incorporated or Qualifed 11/26/1997				
2. Principal Place of Business   2a. Mailing Address							4. FEI Number		Appl	ied For	
21		26					59-3490933	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e	City & State					6. Election Campaign Financing	\$5.	<b>00</b> M	lay Be	
23		28					Trust Fund Contribution Added to Fees				
Zip	Country	Zip		Count	гу		8. This corporation owes the current year Int	angible			
24	25	29	[:	30			Personal Property Tax.	Yes		□No	
	9. Name and Address of Curre	nt Registered Ag					10. Name and Address of New Registered	Agent			
			-	8	1	Name				;	
	JAM N. ASMA, P.A. S DILLARD ST					Street Add	Iress (P.O. Box Number is Not Acceptable)				
	TER GARDEN FL 34787			8	3						
					1						
			. *	8	4	City	FL	85	Zip Co	ode	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.					ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIŘE	CTOR	 RS IN 12	
	<del></del>	ND DIRECTORS	☐ DELETE	1.1 ML	-		ADDITIONAL PROPERTY OF CONTROL OF	Cha		Addition	
TITLE	PTSD CARLOS IR			1.2 NAM		1		_	•	_	
NAME	CANTERO, CARLOS JR. 7706 AVALON RD			ı.		ADDRESS					
STREET ADDRESS	WINTER GARDEN FL 34787			1		1					
CITY-ST-ZIP	WINTER GARDEN FL 34/6/		DELETE	2.1 TITU		-217		☐ Cha	nge	Addition	
TITLE			- DELETIE	2.2 NAM		ţ		_	•	-•	
NAME	·			8		ADDRESS					
STREET ADDRESS				2.3 3 IKI		1	التفايين بالسجاحة العوماطية				
CITY-ST-ZIP TITLE			DELETE	3.1 TITL	_	1-21		Cha	inge	Addition	
				3.2 NAM							
NAME	(					ADDRESS					
STREET ADDRESS CITY-ST-ZIP	1			3.4. CIT		ł					
TITLE	·		☐ DELETE	4.1 TITL				Cha	inge	☐ Addition	
NAME	}			4. 2 NA							
STREET ADDRESS				1		ADDRESS					
CITY-ST-ZIP				4.4 CITY							
TITLE			DELETE	5.1 TITU				. 🔲 Cha	ange	☐ Addition	
NAME	Į			5.2 NAM	E	ļ					
STREET ADDRESS			*	5.3 STR	EET	ADDRESS					
CITY-ST-ZIP				5.4 CITY	-ST	-ZIP	<u> </u>				
TITLE			☐ DELETE	6.1 TTTL	Ē			☐ Cha	inge	☐ Addition	
NAME				6.2 NAM	ŧΕ	1					
STREET ADDRESS	1			63 STD	CCT.	ADDRESS					
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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, with all other like empowered.

SIGNATURE: