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 # P98000024410

1. Corpora ion Name

AMERICAN MODERN, INC.

Principal Place of Business

Mailing Address

112 EASTWIND LANE

112 EASTWIND LANE

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90017 006 ***150.00



FERN PARK FL	32730	FERN PARK FL 32730		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
		_		03/16/1998	
2. Principal Pr	face of Business	2a. Mailing Address	+ 1.1.	4. FEI Number 3498195	App ied For
21 / 7 3	2 WINTEIGNEN SIL	1/32 W. ~	tergreen bluc	5-1-2/10119	Not Applicable \$8.75 Additional
Suite, Art.	#, etc/	Suite, Apt. #, etc.	/	5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 W'	off Park FC	28 Winter	Country	Trust F and Contribution 8. This corporation owes the current year I	Added to Fees
24 3 2	19 1 25 US A	29 3 2 79 2 30	US17	Personal Property Tax. 10. Name and Address of New Registere	.⊠Yes []No
9. Name and Address of Current Registered Agent 10. Name and Address of New Regis					Agent
ZAZYK DAVID P					
112 EASTWIND LANE				ess (P.O. Box Number is Not Acceptable)	
FERN PARK FL 32730			83		
			_		05 75 Ci do
			84 City	F:	-
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State or Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
office or re agent. Fa	egistered agent, or both, in the State o m familiar with, and accept the obligation	ns of Section 607.0505, Flc rida	Statutes.	it's board of offectors. Thereby accept the app	C - GO
SIGNATURE				- 4	46-79
	Signature, typed or printed para of registered agent		istered Agent signature required	ADDITIC NS/CHANGES TO OFFICERS /	ND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	13.	ADDITIC NS/CHANGES TO CITTUE TO	☐ Change ☐ Addition
TITLE NAME	ZAZYK, DAVID P	<u> </u>	1.2 MALVE	,	,
STREET ADDRESS	112 EASTWIND LANE		1.3 STREET ADDRESS /	732 Wintergreen 6. Vinter Park, F	vd 1
CITY-ST-ZIP	FERN PARK FL 32730		1.4 CITY-ST-ZIP	VIN ter Pack, F	32792
TITLE	1 2104 17444 12 02700	☐ DELETE	2.1 TITLE		Change Addition
NAME .			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		į
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Change Addition
TITLE		□ DECE IE	4.1 IIILE 4.2 NAME		
NAME			4.3 STREET ADDRESS		
STREET ADDRES S			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE			5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRES S			6.3 STREET ADDRESS		
CITY-ST-ZIP			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 coath; 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 13 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED.