2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000029484

Entity Name: AMERIMIX INDUSTRIES, INC.

FILED Aug 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

2941 5TH AVE N. 8201 ARROWRIDGE BOULEVARD US SAINT PETERSBURG, FL 33713 CHARLOTTE, NC 28224

Current Mailing Address: New Mailing Address:

375 NORTHRIDGE ROAD 2941 5TH AVE N SAINT PETERSBURG, FL 33713 US SUITE 350

ATLANTA, GA 30350 US

FEI Number: 65-0827704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LARSON & LARSON, P.A CT CORPORATION SYSTEM 11199-69TH STREET NORTH 1200 SOUTH PINE ISLAND ROAD LARGO, FL 33773 PLANTATION, FL 33324

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.

SIGNATURE: DALE MORRIS FOR CT CORPORATION SYSTEM 08/16/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: (X) Change () Addition SANDBROOK, WILLIAM J Name: HALLER, ROY Name: 16601 OLD US HWY 41 375 NORTHRIDGE ROAD, SUITE 350 Address: Address: ATLANTA, GA 30350 City-St-Zip: FT MYERS, FL 33912 City-St-Zip:

PCEO Title: Title: () Delete (X) Change () Addition HAAS, KEITH Name: CHIAPPO, JORGE G Name:

2941 5TH AVE N. 375 NORTHRIDGE RD., SUITE 350 Address: Address:

SAINT PETERSBURG, FL 33713 ATLANTA, GA 30350 City-St-Zip: City-St-Zip:

Title: Title: () Delete DEVP () Change (X) Addition

MASKE, DAVID Name: Name:

8201 ARROWRIDGE BOULEVARD Address Address:

City-St-Zip: City-St-Zip: CHARLOTTE, NC 28224

Title: () Delete Title: () Change (X) Addition

CHIAPPO, JORGE G Name: Name: Address: Address: 2941 5TH AVENUE NORTH City-St-Zip: City-St-Zip: SAINT PETERSBURG, FL 33713

Title: Title: () Change (X) Addition () Delete

HICKMAN, GARY P Name: Name: Address:

Address: 375 NORTHRIDGE ROAD, SUITE 350

City-St-Zip: City-St-Zip: ATLANTA, GA 30350

Title: () Delete Title: CFO () Change (X) Addition

Name: Name: SECO, GIL

8201 ARROWRIDGE BLVD. Address: Address: City-St-Zip: City-St-Zip: CHARLOTTE, NC 28224

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY P. HICKMAN AS 08/16/2007