

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90053 043 ***150.00

DOCUMENT # P98000108183

1. Corporation Name

AMERICAN INTERNATIONAL INDUSTRIES, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1998

4. FEI Number

65-0887762

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

Principal Place of Business

Mailing Address

**8278 NW 66TH STREET
MIAMI FL 33166**

**8278 NW 66TH STREET
MIAMI FL 33166**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARRION, ROBERT
8278 NW 66TH STREET
MIAMI FL 33166**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Robert CARRION

Jan. 27, 1999

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

TITLE **Philip GILLIES, Pres.**

1.1 TITLE ☐ Change ☐ Addition

NAME **10292 Peyton Path Cove**

1.2 NAME

STREET ADDRESS **Collierville, TN 38017**

1.3 STREET ADDRESS

CITY-ST-ZIP **Collierville, TN 38017**

1.4 CITY-ST-ZIP

TITLE **TREAS, Ferial SEBLANI**

2.1 TITLE ☐ Change ☐ Addition

NAME **4268 Fox Ridge Drive**

2.2 NAME

STREET ADDRESS **Weston, FL 33331**

2.3 STREET ADDRESS

CITY-ST-ZIP **Weston, FL 33331**

2.4 CITY-ST-ZIP

TITLE **SECRY, Hassan SEBLANI**

3.1 TITLE ☐ Change ☐ Addition

NAME **4268 Fox Ridge Drive**

3.2 NAME

STREET ADDRESS **Weston, FL 33331**

3.3 STREET ADDRESS

CITY-ST-ZIP **Weston, FL 33331**

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-ST-ZIP

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

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 ADDRESS

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 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 as an attachment with an address, with all other like empowered.

SIGNATURE:

Hassan SEBLANI, Secry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)