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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # \$23979

(5)

FILED May 02 1997 8:00am Secretary of State

1. Corporation Name A.M.D. NORTH AMERICA CORPORATION Principal Place of Business 5300 N.W. 12TH AVENUE #2 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 1. Corporation Name Mailing Address 5300 N.W. 12TH AVENUE #2 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309									
						3. Date Incorporated or Qualified 01/10/1991		te of Last F 26/1996	Report
2. Principa!	Place of Business	2a. Mailing Add	dress		. ,,,,,,,	4. FEI Number			pplied For
1		26				65-0239739		N	ot Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #	#, etc.			5. Certificate of Status Desired			Additional equired
City & Sta	ato	City & State)			6. Election Campaign Financing		\$5.00	May Be
3		28				Trust Fund Contribution			to Fees
_ Zιρ ∃1	Country	Zip	-	Country	<i>t</i>	8. This corporation has liability fo			s. 199.032,
4	9 Name and Address of Curren	29	30	ــــــــــــــــــــــــــــــــــــــ	····		Yes C	-	
9. Name and Address of Current Registered Agent				81 Name		10. Name and Address of New Registered Agent			
BOWMAN, DAVID S ONE E BROWARD BLVD									
	JITE 702				Street Add	eet Address (P.O. Box Number is Not Acceptable)			
	LAUDERDALE FL 33301			83					···········
• •					0			[aa] 72:u	<u> </u>
				84	City		FL	85 Zip	Code
						proporation submits this statement for the ation's board of directors. I hereby acc	purpose of ept the appo	changing pintment as	its registered s registered
SIGNATURE	Signature, typed or printed harmalal registered ag OFFICERS AN	ent and title if applicable. ID DIRECTORS				rporation submits this statement for the ation's board of directors. I hereby acc juited when reinstaling) ADDITIONS/CHANGES TO OFF	purpose of ept the appo DATE FICERS AND		RS IN 12
 Pursuan office or agent. I SIGNATURE LILE NAME 	Signature, typed or printed name of legisticited ag OFFICERS AN P DESPREAUX, ANDRE MICHEL	ent and title if applicable. ID DIRECTORS	(NOTE Re	13. 1.1 TITLE 1.2 NAME	ent signature req	julied when reinstaling) ADDITIONS/CHANGES TO OFF	purpose of ept the appo DATE FICERS AND	DIRECTO	RS IN 12
SIGNATURE 12. TILE NAME	Signature, typed or printed name of legisticited ag OFFICERS AN P DESPREAUX, ANDRE MICHEL 2208 NE 177H TERR	ent and title if applicable. ID DIRECTORS	(NOTE Re	13. 1.1 TITLE 1.2 NAME	ent signature req	uired when reinstaling) ADDITIONS/CHANGES TO OFF	purpose of epi the appoint DATE ICERS AND	DIRECTOI Change	RS IN 12
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SIGNATURE 12. THE NAME STREET ADDRESS C-TY-ST-ZIP TITLE	OFFICERS AN P DESPREAUX, ANDRE MICHEL 2208 NE-17TH TERR WILTON MANORS FL S	ent and title if applicable ID DIRECTORS	(NOTE Re	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 City-S 2.1 Title	ent signature req	uired when reinstaling) ADDITIONS/CHANGES TO OFF	DATE CERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. TILE NAME SIPEET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN P DESPREAUX, ANDRE MICHEL 2208 NE-17TH TERR WILTON MANORS FL S DESPREAUX, ANNIE	ent and title if applicable ID DIRECTORS	(NOTE RE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 City-S 2.1 TITLE 2.2 NAME	r ADDRESS Z	LYGI NE 47 ST LIGHTHOUSE POINT	DATE CERS AND	DIRECTOI Dichange	RS IN 12
SIGNATURE 11. TILE NAME SIPEET ADDRESS TITLE NAME STREET ADDRESS	OFFICERS AN P DESPREAUX, ANDRE MICHEL 2208 NE 177H TERR WILTON MANORS FL S DESPREAUX, ANNIE -2208 NE 177H TERRACE	ent and title if applicable ID DIRECTORS	(NOTE RE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 City-S 2.1 TitlE 2.2 NAME 2.3 STREET	r ADDRESS 2 I ADDRESS 2 I ADDRESS 2	LUTED When reinstalling) ADDITIONS/CHANGES TO OFF LIGHTHOUSE POINT THE NE 47 ST	purpose of epi the appoint DATE FICERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 112. 111E NAME SIPEET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS DITY-SI-ZIP	OFFICERS AN P DESPREAUX, ANDRE MICHEL 2208 NE-17TH TERR WILTON MANORS FL S DESPREAUX, ANNIE	unt and title if applicable. ID DIRECTORS D 0	(NOTE RE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	r ADDRESS 2 I ADDRESS 2 I ADDRESS 2	LUTED When reinstalling) ADDITIONS/CHANGES TO OFF LIGHTHOUSE POINT TO NE 47 ST	DATE CERS AND	DIRECTOI Change	RS IN 12 Addition
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14. Ho 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 72 or Dispute the same legal effect as if made under oath; that appears in Block 12 or Block 72 or Dispute the same legal effect as if made under oath; that may name appears in Block 12 or Block 72 or Dispute the same legal effect as if made under oath; that may name appears in Block 12 or Block 73 or Dispute the same legal effect as if made under oath; that may name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that may name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that my name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that my name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that my name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that my name appears in Block 12 or Block 74 or Dispute the same legal effect as if made under oath; that my name appears in Block 12 or Block 74 or Block

SIGNATURE:

04-22-94 (954)772835

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