

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S23979

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: A.M.D. NORTH AMERICA CORPORATION

## Current Principal Place of Business:

5300 N.W. 12TH AVENUE  
UNIT 2  
FT. LAUDERDALE, FL 33309

## New Principal Place of Business:

3041 WEST MCNAB ROAD  
POMPANO BEACH, FL 33069

## Current Mailing Address:

5300 N.W. 12TH AVENUE  
UNIT 2  
FT. LAUDERDALE, FL 33309

## New Mailing Address:

3041 W.MCNAB ROAD  
POMPANO BEACH, FL 33069

FEI Number: 65-0239739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MICHEL, DESPRENEX A  
2761 NE 47TH ST.  
LIGHTHOUSE POINT, FL 33064 US

## Name and Address of New Registered Agent:

ANDRE, DESPREAUX A  
2761 NE 47TH ST.  
LIGHTHOUSE POINT, FL 33064 US

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: ANDRE DESPREAUX

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DESPREAUX, ANDRE MIC, HEL  
Address: 2761 NE 47 ST  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S ( ) Delete  
Name: DESPREAUX, ANNIE,  
Address: 2761 NE 47 ST  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDRE M.DESPREAUX

P

04/15/2004

Electronic Signature of Signing Officer or Director

Date