FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S34164** **(1)**

1. Corporation Name

AMSTOR INC.

Principal Place of Business	Mailing Address
15675 N.W. 15TH AVE. SUITE 202 MIAMI FL 33169 US	15675 N.W. 15TH AVE. SUITE 202 MIAMI FL 33169 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/26/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 3326 Mary Street	26 3326 Mary Street
Suite, Apt. #, etc. 22 Suite 301	Suite, Apt. #, etc. 27 Suite 301
City & State 23 Miami, Florida	City & State 28 Miami, Florida
Zip / County 24 33133 / 25 U.S.A.	Zip / Country 29 33133 / 30 U.S.A.

4. FEI Number: 65-0276784 ☐ 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 has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
UCC FILING & SEARCH SERVICES INC 526 EAST PARK AVE.. SUITE 200 TALLAHASSEE FL 32301	01 Name 02 Street Address (P.O. Box Number is Not Acceptable) 03 04 City **FL** 05 Zip Code

11. Pursuant to the provisions of Sections 607.0505 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:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95	
01 Title	P	01 Title	P ☒ Change ☐ Addition
02 Name	WALSH, JOHN W	02 Name	Walsh, John W
03 Street Address	15675 N.W. 15TH AVE., SUITE 202	03 Street Address	3326 Mary Street, Suite 301
04 City, St, Zip	MIAMI FL	04 City, St, Zip	Miami, Florida 33133
05 Title		05 Title	☐ Change ☐ Addition
06 Name		06 Name	
07 Street Address		07 Street Address	
08 City, St, Zip		08 City, St, Zip	
09 Title		09 Title	☐ Change ☐ Addition
10 Name		10 Name	
11 Street Address		11 Street Address	
12 City, St, Zip		12 City, St, Zip	
13 Title		13 Title	☐ Change ☐ Addition
14 Name		14 Name	
15 Street Address		15 Street Address	
16 City, St, Zip		16 City, St, Zip	
17 Title		17 Title	☐ Change ☐ Addition
18 Name		18 Name	
19 Street Address		19 Street Address	
20 City, St, Zip		20 City, St, Zip	
21 Title		21 Title	☐ Change ☐ Addition
22 Name		22 Name	
23 Street Address		23 Street Address	
24 City, St, Zip		24 City, St, Zip	

14. I DO HEREBY CERTIFY that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 1 or Block 11 if changed, or added, above with an address.

SIGNATURE: John W. Walsh, Pres. 5/1/95 (305) 444-0564

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone #

01184934 CP