2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # S46707

1. Entity Name AMU CORPORATION

FILED May 01, 2006 08:00 AM Secretary of State

Principal Place of Business

2731 NORTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33306

Mailing Address

2731 NORTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33306

DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04282006 No Chg-P Applied F∈ 4. FEI Number 65-0282257 Not Applic. \$8.75 Additional 5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

PATEL, GANPAT 1317 S FED HWY FORT LAUDERDALE, FL 33316

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I am lamillar with, and a	
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Flegistered	Agent signature	n required when reinstaling)	DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fi			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-IP	P PATEL, GANPAT S 2731 N. FEDERAL HGYWY. FORT LAUDERDALE, FL 33306				U00000547797 05/12/06-80039-013 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATEL, GITA G 2731 N. FEDERAL HGYWY. FORT LAUDERDALE, FL 33306			03/12/00 00033 013 130:00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CHTY-ST-ZIP						
Title						

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the informatic indicated on this report or suppliemental 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 directly 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 10 or Block 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

Crarpel S. Parel. / President ~127106 9511.565.1883