FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CIGNATURE.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$76997

(3)

AMERICAN CHANGER CORP.

FILED
Jan 27 1998 8:00am
Secretary of State

1/20/98

Principal Place	of Business	Mailing Address			DÅ 010 11 41011 2 1011 B1041 1004
4710 NW 15 AVE		4710 N2 15 AVENUE			
STE 5		STE S			
		FT. LAUDERDALE FL 33 US	3309	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
00		03		08/30/1991	
2. Principal Pl	ace of Business	2s. Mailing Address		4. FEI Number	Applied For
21		26		65-0288287	Not Applicable
Suite, Apt.	W, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State)	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28]	Country	B. This corporation owes or has paid the co	Added to Fees
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	d Agent
BARRY A DIAMOND, ESQ			81 Name		
	1 N PINE ISLAND RD		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 250					
FI	LAUDERDALE FL 33321		83		
			84 City		85 Zip Code
11. Pursuant t	o the provisions of Sections 607 050	32 and 607 1508. Florida Stetu	ites, the above-named cor	poration submits this statement for the purpose	of changing its registered
office or re	egistered agent, or both, in the State of familiar with, and accept the oblig	e of Florida, Such change was	authorized by the corpora	tion's board of directors. I hereby accept the ap	opointment as registered
•	л ж инкаг w i(п, ан о а ссерт иле овлу	pations of, Section 607.0305, F	TOTICA SIGICIES.		4
SIGNATURE	Signature, typed or printed name of registered ag	ent and the if applicable (NC	OTE: Registered Agent signature requ	rired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	STEINBOK, HARRY		1.2 NAME		
STREET ADORESS	9506 N.W. 33RD PLACE SUNRISE FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CITY-S1-ZIP 2.1 TITLE		Change Addition
NAME	VAUGHN JERRY	D occur	2.2 NAME		Citalian Citalian
STREET ADDRESS	5033 SW 87TG TENN.		2.3 STREET ADDRESS		
CITY-ST-ZIP	COOPER CITY FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		L] DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CiTY-ST-ZIP		Ohanna Addition
TITLE	A.	["] Dereit	5.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREFT ADDRESS		
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		_	6.4 CID S - ZIP		
14. I hereby co	ertify that the information supplied w	this filing does not qualify	for the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
officer or o Block 12 o	on this annual report or supplement firector of the corporation or the rec or Block 13 if changed, or on ay atta	ai armyai report is true and co civer or trustee empewered to ichment with an address	execute this report as req	ure shall have the same legal effect as if made u juired by Chapter 607, Florida Statutes; and that	unuer oath; that I am an t my name appears in