

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # V16446
 1. Entity Name
 A M PRODUCTS, INC.



Principal Place of Business Mailing Address
 21218 ST ANDREWS BLVD #508 21218 ST ANDREWS BLVD #508
 BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US

DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0318577 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 FLUGEL, WALTER
 21218 ST ANDREWS BLVD #508
 BOCA RATON, FL 33433

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FLUGEL, WALTER
STREET ADDRESS	2181 TOWN PLACE DR
CITY-ST-ZIP	BOCA RATON, FL
TITLE	/
NAME	/
STREET ADDRESS	/
CITY-ST-ZIP	/
TITLE	/
NAME	/
STREET ADDRESS	/
CITY-ST-ZIP	/
TITLE	/
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CITY-ST-ZIP	/
TITLE	/
NAME	/
STREET ADDRESS	/
CITY-ST-ZIP	/

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Walter Flugel 01/06/05 5613620844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #