FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

V32670

(4)

1. Consideration Name
A & M SALES, INC. OF SOUTH FLORIDA

Principal Place of Business Mailing Address 5111 D. NESTING WAY 5111 D. NESTING WAY 5060-B NESTING WAY DELRAY BEACH FL 33484									
DELRAY BEACH FL 33484 US					3. Date Incorporated or Qualified 04/20/1992	3a. Date (1 ast 8 as d			
2. Principal Plac	e of Business	2a. Mailing Address				4. FEI Number 65-0312305			Applied For
Suite, Apt. #,	etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 Additional	
2] Ory & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
3] 	Country	7(0)	T Coi	ıntry		Trust Fund Contribution 8. This corporation has liability for in			to Fees
4]	25	29	30			Florida Statutes Yes		X 61 1001 6	100.002,
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered .	Agent	
STEIN	ALBERT M.			81	Name				
5060-B			82	Street A	Address (P.O. Box Number is Not Acceptable)				
DELRAY	/ BEACH FL 33484			83					
				84	City		· · · · · · · · · · · · · · · · · · ·	85 Zıç	Code
					,	rporation submits this statement for the pur board of directors. I hereby accept the appo	FL	.	
12. ITLE IAME ITHEE ALTOREUS	D OFFICERS AND DRUCKS, MILTON 5111 D. NESTING WAY DELRAY BEACH FL		13. 1 11 12N 13S	IITLE IAME	ADDRESS	charud wher renstatiogs ADDITIONS/CHANGES TO OFFI		DIRECTO Change	RS IN 12
IL.E IAME URFELACORESS	D Stein, Albert 5111 D. Nesting Way Delray Beach Fl	A DEILLE	2 1 T 2 2 N 2 3 S	TITLE IAME TREET	ADORESS	Albert STEIN BOYS STIREUP CAY CO	r.	C hange	Addition
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VAME			62 N	AME					
STREET ADDRESS					address				
ETYSEZE	contity that the information constact of	with this films is valuntarily for		doos		lify for the exemption stated in Section 119.	77(2)(I.A. E)-	rido Casa	00.16.445
certify that to eath, that I	the information indicated on this armu am an officer of director of the corpor	al report or supplemental ani	nual report se empowe	is tru	e and ac	mily for the exemption stated in Section 1135 curate and that my signature shall have the a this report as required by Chapter 607, Fig.	same legal	effect as if	made under

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/96

407-736-5549 Daytime Priore #