

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

APPROVED  
AND  
FILED

10/2

08 JUL 27 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/08/1992	
4. FEI Number 65-0346477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current-year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

PROFIT CORPORATION  
ANNUAL REPORT  
1998

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

DOCUMENT # V42491 (3)  
1. Corporation Name  
AMBER MARIE INC.

Principal Place of Business  
1806 S YOUNG CIR  
HOLLYWOOD FL 33020  
US

Mailing Address  
9720 PINES BLVD  
PEMBROKE PINES FL 33024  
US

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

MCINNIS, KAREN DD.  
1806 S YOUNG CIR  
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTSD	<input type="checkbox"/> DELETE
NAME	MCINNIS, KAREN D.	
STREET ADDRESS	34 SW 7 ST	
CITY-ST-ZIP	DANIA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 7-8-98

2092

AMBER MARIE, INC.  
1810 S YOUNG CIRCLE  
HOLLYWOOD, FL 33020

JULY 6, 1998

FLORIDA DEPARTMENT OF STATE  
SANDRA B. MORTHAM  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

RE; DOCUMENT #V42491

A SECOND NOTICE WAS RECEIVED FOR NOT FILING THE 1998 ANNUAL REPORT FOR THE ABOVE CORPORATION. IN JANUARY 1998 MY ACCOUNTANT DREW A CHECK MADE PAYABLE TO THE DEPT OF STATE IN THE AMOUNT OF \$ 150.00 AND WAS MAILED BY HIM ALONG WITH APPROXIMATELY THIRTY OTHER REPORTS PREPARED BY HIS OFFICE. THIS CORPORATION AND ONE OTHER CLIENT OF HIS WAS SENT A SECOND NOTICE. THIS CORPORATION IN THE LONG TIME BEING IN EXISTENCE HAS A PERFECT RECORD WITH THE STATE OF FLORIDA AND IS ASKING THAT THE LATE FILING FEE BE WAIVED. A CHECK IN THE AMOUNT OF \$ 150.00 IS ENCLOSED REPLACING THE ORIGINAL ONE SENT WITH THE ORIGINAL FORM WHICH A COPY IS ATTACHED.

THANK YOU FOR YOUR COOPERATION IN ADVANCE.

  
KAREN D. MCINNIS PRESIDENT