

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028586

Entity Name: A-M-A-S-T, INC.

Current Principal Place of Business:

123 AVENUE C, SW
WINTER HAVEN, FL 33880

Current Mailing Address:

P.O. BOX 1151
WINTER HAVEN, FL 33882

FEI Number: 31-1763451

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRAKAS, ANDREW P
123 AVENUE C, S.W.
WINTER HAVEN, FL 33880 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD, SECRETARY
Name MASTROMINAS, ANDREAS
Address 475 SHADY LANE
City-State-Zip: BARTOW FL 33830

Title T
Name MASTROMINAS, NIKOLAOS
Address 475 SHADY LANE
City-State-Zip: BARTOW FL 33830

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANDREAS MASTROMINAS

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02/21/2014

Electronic Signature of Signing Officer/Director Detail

Date