

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000036203

**FILED
May 06, 2015
Secretary of State
CC4850643770**

Entity Name: I AM AMERICAN CORP

Current Principal Place of Business:

5469 GROVE CROSSINGS BLVD
ORLANDO, FL 32839

Current Mailing Address:

5469 GROVE CROSSINGS BLVD
ORLANDO, FL 32839 US

FEI Number: 46-5251062

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARIN, LOUIS B
5469 GROVE CROSSINGS BLVD
ORLANDO, FL 32839 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 CEO
Name MARIN, LOUIS B
Address 5469 GROVE CROSSINGS BLVD
City-State-Zip: ORLANDO FL 32839

Title DIR
Name KOCH, MICHAEL R
Address 8033 RURAL RETREAT COURT
City-State-Zip: ORLANDO FL 32819

Title DIR
Name ENNS, LOREN
Address 4944 EASTER CIRCLE
City-State-Zip: ORLANDO FL 32808

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: LOUIS MARIN

CEO

05/06/2015

Electronic Signature of Signing Officer/Director Detail

_____ Date