

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076748

FILED
Feb 02, 2009
Secretary of State

Entity Name: AMERICAN BAG COMPANY

Current Principal Place of Business:

515 E. LAS OLAS BLVD, STE 1040
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

515 E LAS OLAS BOULEVARD
STE 1040
FORT LAUDERDALE, FL 33301 US

Current Mailing Address:

515 E. LAS OLAS BLVD, STE 1040
FT. LAUDERDALE, FL 33301

New Mailing Address:

515 E LAS OLAS BOULEVARD
STE 1040
FORT LAUDERDALE, FL 33301 US

FEI Number: 20-4988162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, JEFFERSON
999 PONCE DE LEON BLVD., STE. 510
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411 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: TINA MAKI

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: REINER, PATRICK
Address: 515 E. LAS OLAS BLVD, STE 1040
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: CFO () Delete
Name: LAREZ, REINALDO
Address: 515 E. LAS OLAS BLVD, STE 1040
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: PD () Delete
Name: REINER, EDITH
Address: 515 E. LAS OLAS BLVD - SUITE 1040
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: REINER, PATRICK
Address: 515 E LAS OLAS BOULEVARD, STE 1040
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: CFO (X) Change () Addition
Name: LAREZ, REINALDO
Address: 515 E LAS OLAS BOULEVARD, STE 1040
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: PD (X) Change () Addition
Name: REINER, EDITH
Address: 515 E LAS OLAS BOULEVARD, STE 1040
City-St-Zip: FORT LAUDERDALE, FL 33301 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDITH REINER

PD

02/02/2009

Electronic Signature of Signing Officer or Director

Date