

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

FILED

**Apr 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P15089 (6)
 1. Corporation Name
AMERICAN GENERAL REALTY INVESTMENT CORPORATION



Principal Place of Business 2929 ALLEN PKWY SUITE A36-01 HOUSTON TX 77019-2155 US	Mailing Address PO BOX 3247 SUITE A36-01 HOUSTON TX 77253 US
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3. Date Incorporated or Qualified 07/07/1987	3a. Date of Last Report 05/01/1996
4. FEI Number 74-6046915	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 has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 25	Country 30
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9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PD	<input type="checkbox"/> DELETE
NAME	RASMUSSEN, NICHOLAS R	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77019	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	HAMSTRA, SONIA W	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77019	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CLAPSADDLE, DON R	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77019	
TITLE	V	<input type="checkbox"/> DELETE
NAME	KUPSTAS, LAWRENCE	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77019	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	YOUNG, AUSTIN P	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77191	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GERLACH, OTTO B III	
STREET ADDRESS	2929 ALLEN PKY	
CITY - ST - ZIP	HOUSTON TX 77019	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGED	ADDED
1.1 TITLE	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
1.2 NAME	Jamileh B. Soufan		
1.3 STREET ADDRESS	2929 Allen Parkway		
1.4 CITY - ST - ZIP	Houston, TX 77019		
2.1 TITLE	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
2.2 NAME	W. Michael Schaffer		
2.3 STREET ADDRESS	2929 Allen Parkway		
2.4 CITY - ST - ZIP	Houston, TX 77019		
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 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: OTTO B GERLACH III **SIGNATURE REQUIRED** Date: **4/18/97** Daytime Phone #: **(713) 522-1111**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)