

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P96000053749

1. Entity Name
A.G.M. SILVER, INC.



Principal Place of Business
55 NE 1ST ST SUITE 12
MIAMI, FL 33132

Mailing Address
55 NE 1ST ST SUITE 12
MIAMI, FL 33132



03082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0669740

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMINOV, ABRAM
55 NE 1ST ST SUITE 12
MIAMI, FL 33132

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	AMINOV, ABRAM
STREET ADDRESS	55 NE 1ST ST SUITE 12
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	DS
NAME	AMINOV, MANI
STREET ADDRESS	55 NE 1ST ST SUITE 12
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	DT
NAME	AMINOV, GEORGE
STREET ADDRESS	55 NE 1ST ST SUITE 12
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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05/17/07-80009-010 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with the same legal effect as if empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mani Aminov 4/25/07 (305) 373-9898

Date

Daytime Phone #