

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90249 010 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000101782

1. Corporation Name
AGS PROPERTIES CORPORATION



Principal Place of Business: 6075 SUNSET DRIVE #201 SOUTH MIAMI FL 33143
Mailing Address: 6075 SUNSET DRIVE #201 SOUTH MIAMI FL 33143

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
City & State (23)
Zip (24) Country (25)
Suite, Apt. #, etc. (22)
City & State (27)
Zip (29) Country (30)

3. Date Incorporated or Qualified: 12/03/1998
4. FEI Number: 65-0879699
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent
GROSSMAN, JEROME
6075 SUNSET DRIVE #201
SOUTH MIAMI FL 33143

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: [Signature] DATE: 12/01/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE: D [DELETE] NAME: SALUSTIANO COSTA LIMA DA SILVA
STREET ADDRESS: 6075 SUNSET DRIVE #201
CITY-ST-ZIP: SOUTH MIAMI FL 33143
TITLE: D [DELETE] NAME: ELIDIA HERTZOG DA SILVA
STREET ADDRESS: 6075 SUNSET DRIVE #201
CITY-ST-ZIP: SOUTH MIAMI FL 33143
TITLE: D [DELETE] NAME: ALZIRA DENISE HERTZOG DA SILVA
STREET ADDRESS: 6075 SUNSET DRIVE #201
CITY-ST-ZIP: SOUTH MIAMI FL 33143
TITLE: [DELETE] NAME: [DELETE]
STREET ADDRESS: [DELETE]
CITY-ST-ZIP: [DELETE]
TITLE: [DELETE] NAME: [DELETE]
STREET ADDRESS: [DELETE]
CITY-ST-ZIP: [DELETE]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: PRESIDENT & TREASURER
1.2 NAME: SALUSTIANO COSTA LIMA DA SILVA
1.3 STREET ADDRESS: 6075 SUNSET DRIVE # 201
1.4 CITY-ST-ZIP: SOUTH MIAMI FL 33143
2.1 TITLE: VICE-PRESIDENT
2.2 NAME: ELIDIA HERTZOG DA SILVA
2.3 STREET ADDRESS: 6075 SUNSET DRIVE # 201
2.4 CITY-ST-ZIP: SOUTH MIAMI FL 33143
3.1 TITLE: VICE PRESIDENT
3.2 NAME: ALZIRA DENISE HERTZOG DA SILVA
3.3 STREET ADDRESS: 6075 SUNSET DRIVE # 201
3.4 CITY-ST-ZIP: SOUTH MIAMI FL 33143
4.1 TITLE: VICE PRESIDENT & SECRETARY
4.2 NAME: JEROME GROSSMAN
4.3 STREET ADDRESS: 6075 SUNSET DRIVE # 201
4.4 CITY-ST-ZIP: SOUTH MIAMI FL 33143
5.1 TITLE: [DELETE]
5.2 NAME: [DELETE]
5.3 STREET ADDRESS: [DELETE]
5.4 CITY-ST-ZIP: [DELETE]
6.1 TITLE: [DELETE]
6.2 NAME: [DELETE]
6.3 STREET ADDRESS: [DELETE]
6.4 CITY-ST-ZIP: [DELETE]

14. I 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, with all other like empowered.

SIGNATURE: [Signature] DATE: 12/01/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: JEROME GROSSMAN
Date: 12/01/99 Daytime Phone #: (305) 662-6772

CR2E034 (1/198)