

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000036497

1. Entity Name

AMERICAN GENERAL HOLDINGS, CORP.

FILED

00 MAY -1 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

14305 N.W. 14th St.
PEMBROKE PINES, FL 33028

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

14305 N.W. 14th St
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FL

City & State

4. FEI Number

Applied For
 Not Applicable

Zip

33028

Country

U.S.

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Antonio Lara
14315 N.W. 14th Street
Pembroke Pines, FL 33028

7. Name and Address of New Registered Agent

Name

Andrea M. Calise

Street Address (P.O. Box Number is Not Acceptable)

14305 N.W. 14th Street

City

Pembroke Pines

FL

Zip Code

33028

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.

SIGNATURE

Andrea M. Calise

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

(NOTE: Registered Agent signature required when reinstating)

4/28/00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME Delete
Director Antonio Lara
STREET ADDRESS 14315 N.W. 14th St
CITY-ST-ZIP Pembroke Pines, FL 33028

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME Change Addition
Pres. Secty., Treas Andrea M. Calise
STREET ADDRESS 14305 N.W. 14th Street
CITY-ST-ZIP Pembroke Pines, FL 33028

TITLE NAME Change Addition
STREET ADDRESS 900003246169--2
CITY-ST-ZIP -05/10/00--01016--008

TITLE NAME Change Addition
STREET ADDRESS ***150.00 ***150.00
CITY-ST-ZIP Change Addition

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TS

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Andrea M. Calise

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2000

Date

(954) 214 1793

Daytime Phone #