

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000015402

Entity Name: AMERICAN TECHNOLOGIES GROUP LLC**Current Principal Place of Business:**6065 NW 167 STREET
SUITE B12
MIAMI LAKES, FL 33015**Current Mailing Address:**6065 NW 167 STREET
SUITE B12
MIAMI LAKES, FL 33015 US**FEI Number:** 46-4656823**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOZELINSKI, ANTONIO M
6065 NW 167 STREET
SUITE B12
MIAMI LAKES, FL 33015 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**Title MGRM
Name KOZELINSKI, ANTONIO M
Address 6065 NW 167 STREET
SUITE B12
City-State-Zip: MIAMI LAKES FL 33015Title AMBR
Name RODRIGUEZ, JOSUE F
Address 6065 NW 167 STREET
SUITE B12
City-State-Zip: MIAMI LAKES FL 33015Title AMBR
Name DITADI, ELENA
Address 6065 NW 167 STREET
SUITE B12
City-State-Zip: MIAMI LAKES FL 33015Title AMBR
Name DITADI, LUCIANO
Address 6065 NW 167 STREET
SUITE B12
City-State-Zip: MIAMI LAKES FL 33015

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTONIO MARKOS KOZELINSKI**PRESIDENT****04/13/2015**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date