

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002390

FILED
Jan 06, 2010
Secretary of State

Entity Name: AGCERT SERVICES (USA), INC.

Current Principal Place of Business:

1990 WEST NEW HAVEN BLVD
SUITE 205
MELBOURNE, FL 32904

New Principal Place of Business:

1990 WEST NEW HAVEN AVENUE
SUITE 205
MELBOURNE, FL 32904 US

Current Mailing Address:

1990 WEST NEW HAVEN BLVD
SUITE 205
MELBOURNE, FL 32904

New Mailing Address:

1990 WEST NEW HAVEN AVENUE
SUITE 205
MELBOURNE, FL 32904 US

FEI Number: 20-2289226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR.
Name: CENTER, MICHAEL DIR/PRE
Address: 1990 W. NEW HAVEN AVENUE, SUITE 205
City-St-Zip: MELBOURNE, FL 32904 US

Title: MR.
Name: PAZMINO, GALO VICE-P
Address: 1990 W. NEW HAVEN AVENUE, SUITE 205
City-St-Zip: MELBOURNE, FL 32904 US

Title: MR.
Name: DASANTOS, BERNERD DIR.
Address: 4300 WILSON BLVD.
City-St-Zip: ARLINGTON, VA 22203 US

Title: MS.
Name: NGUYEN, THAM SEC.
Address: 4300 WILSON BLVD.
City-St-Zip: ARLINGTON, VA 22203 US

Title: MS.
Name: ALLINGTON, ALETA AST.SEC
Address: 1990 W. NEW HAVEN AVENUE, SUITE 205
City-St-Zip: MELBOURNE, FL 32904 US

Title: MR.
Name: HIRSH, LAWRENCE TREAS.
Address: 4300 WILSON BLVD.
City-St-Zip: ARLINGTON, VA 22203 US

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALETA ALLINGTON, ASSISTANT SECRETARY

MS.

01/06/2010

Electronic Signature of Signing Officer or Director

Date